JACKS CREEK ELEMENTARY SCHOOL

ASBESTOS

MANAGEMENT PLAN

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LEA:	Chester (County		LEA NO.:	120
	•	Date:	9/30/88	*	

TRANSMITTAL SHEET/AHERA SUBMITTALS 1. **DEFERRAL REQUEST** Resubmittal SUBMISSION: Original .[] STATE REVIEW Remarks: No Exceptions Taken Returned for Reasons Stated 2. MANAGEMENT PLAN SUBMISSION: Resubmittal **New Building** Original П R STATE REVIEW Remarks: No Exceptions Taken П Returned for Reasons Stated MANAGEMENT PLAN PROGRESS REPORT No._____ Dated_ 3. SUBMISSION: Original Resubmittal П П STATE REVIEW Remarks: No Exceptions Taken Returned for Reasons Stated 0 Reviewer's Signature Dated: LEA: Chester Co. Board of Education LEA NO.: 120 Address: P.O. Box 327 Henderson, TN 38340 County: Chester County

Superintendent: Dr. Kathy Coatney Mays

Date: 9/30/88

Name: Gene Cain

No person or firm shall offer to perform or be hired to perform as professionals the services of inspection, preparation of management plans, designing of response actions, or supervising of response actions except as properly accredited under the provisions of The Asbestos Hazard Emergency Response Act of 1986, Public Law 99 - 519, and Code of Federal Regulations Title 40, Part 763 (AHERA). The U. S. Environmental Protection Agency and the State of Tennessee recommend those persons or firms performing as professionals be registered under the registration laws of the State of Tennessee or a state which has resiprocity with the State of Tennessee. Such professionals should be independent practitioners and should have no financial or other interest in contractors, subcontractors, manufacturers, or jobbers under their jurisdiction where direct conflict of interest could occur, except as permitted.

An employee of a State or local public or private education agency (LEA) may provide the services of inspection or preparation of the management plans for their respective LEA's facilities, provided that person is properly accredited under the AHERA laws and regulations.

Accreditation No.: 418

The signatures hereon attest to the above statement and certify that it is the intent of the signatories to carry out all other provisions of the AHERA laws and regulations.

MANAGEMENT PLANNER (MP) (Attach copy of accreditation certificate in Appendix)

Firm/LEA: Madison County B Address: 701 South Highla						
	nd Ave.	Training Agency: Geo:	rgia Institute of			
City/State/Zip: Jackson, TN	38301	Technology				
Telephone: 901-423-0270		Training Course: Mana	aging Asbestos in			
LI.	7.		ldings			
Signature: \\(\left(\text{!} \)	aur	Course Date: March				
Dated: 9/30/8	20	•	g ²			
Dated	-		er#			
<i>*</i>			**			
LOCAL EDUCATION AGENCY	(I EA) DECICNATED BED	CON	•			
LOCAL EDUCATION AGENCY	(LEA) DESIGNATED PER	30N				
Name: Gene Cain		Training Assesses				
Address: 0 Publication	W-34- WILL WAR AND	Training Agency: Geo				
Address: 9 Rutherford Ave. City/State/Zip: Jackson, TN		Training Course: Inst	pecting & Managing A			
Telephone: 901-427-6428	38301	Total Hours: 40	ch 21-25, 1988			
8/2	رز کر از کر	the Costme	Mayo			
LEA Designated Person's Sign	nature LEAS	uperintendent's Signal				
LEA Designated Person's Signated: 9/30/88	Dates	2 - 1 3	1988			
W/ax/CD		2 - 1 3				
Dated: <u>9/36/88</u>		2 - 1 3				
Dated: 9/30/88 Management)	Dated	1: September 30	1988			
Dated: 9/30/88 Management) Planner's)	Dated LEA: Cheste	er Co. Board of Edu	1988			
Dated: 9/30/88 Management)	Dated	er Co. Board of Edu	1988			
Dated: 935/88 Management) Planner's) Seal)	LEA: Cheste	er Co. Board of Edu	1988			
Dated: 9/35/88 Management) Planner's)-	LEA: Cheste Address: P.O. E	er Co. Board of Edu.	_ LEA NO.:120			
Dated: 935/88 Management) Planner's) Seal)	LEA: Cheste Address: P.O. B Hender Superintendent: Dr. K	er Co. Board of Edu, Box 327 Son, TN 38340 Cathy Coatney May	_ LEA NO.:120			
Dated: 935/88 Management) Planner's) Seal)	LEA: Cheste Address: P.O. E	er Co. Board of Edu, Box 327 cson, TN 38340 Cathy Coatney May	_ LEA NO.:120			

This AHERA Management Plan was developed and has been submitted pursuant to the Asbestos Hazard Emergency Response Act of 1986, Public Law 99-519; and the United States Environmental Protection Agency Rule: Asbestos Containing Material in Schools, 40 CFR Part 763; and the undersigned does hereby certify that the Local Education Agency (LEA) indicated below has and will ensure the following:

- 1. The activities of any persons who perform inspections, reinspections, and periodic surveillance, develop and update management plans, and develop and implement response actions, including operations and maintenance, are carried out in accordance with Part 763 and other State rules and requirements.
- 2. All custodial and maintenance employees are properly trained as required in Part 763 and all other applicable Federal and State regulations (e.g., the Occupational Safety and Health Administration Asbestos Standard for Construction, the EPA Worker Protection Rule or applicable State regulations).
- 3. All workers and building occupants, or their legal guardians, are informed at least once each school year about inspections, response actions, and post-response action activities, including periodic reinspection and surveillance activities, that are planned or in progress.
- 4. All short term workers (e.g., telephone repair workers, utility workers, or exterminators) who may come in contact with asbestos in a school are provided information regarding the locations of asbestos-containing building materials (ACBM) and suspected ACBM assumed to be asbestos-containing materials (ACM).
- 5. All warning labels are posted in accordance with Section 763.95.
- All management plans are available for inspection and notification
 of such availability has been provided as specified in the AHERA
 regulations under Section 763.93(g).
- 7. The undersigned person designated by the LEA pursuant to Section 763.84(g)(1) has received adequate training as stipulated in Section 763.84(g)(2).
- 8. The LEA has and will consider whether any conflict of interest may arise from the interrelationship between the Management Planner and other accredited persons performing AHERA activities.

Signed: Signe Coun	Date: 9/30/8
LEA Designated Person, pursuant to 40 CFR 763.93(i) and 763.84	

Typed Name: Gene Cain

LEA: Chester Co. Board of Education LEA NO.: 120

Date: 9/30/88

List all schools and separate buildings:

D.O.E. SCHOOL NUMBER	SCHOOL NAME OR BUILDING NAME	ADDRESS	спу	ZIP CODE		BM NF	NO ACBM
120 0005	Chester Co. High.	Hwv. 100 East. He	nderson. TN 38	340	x	х	
126 0010	Chester Co. Jr. Hi	gh, Hwy. 100 East	, Henderson, T	'N 38340		х	
	Bus Shop, Hwy. 100						х
120 0015	East Chester Elem.			38340		х	
120 0025	Jack's Creek Elem.		•			х	
120 0028	North Chester Ele				х		
0030	West Chester Elem.	. Hwy. 100 West.	Henderson. TN	38340		х	

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LEGEND:

F = Friable
NF = NonFriable
ACBM = Asbestos-Containing Building Material
D.O.E = Department of Education

LEA: Chester	Co.	Board	of	Education	LEA	NO.:	12	0
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Date:	9/30/88	

1. Date Built		TICS ame, Wing on, etc.	. *	Us o		Total Area , (Square Feet)
8-57	Jacks	Creek		School		14,638
7-74	3 Port	ables	*	0011001		2,592
			507		¥1	-,
	a				-	
						8
2.	STRUCTURAL SYS	TEMS				
Walls:		Floors:		Roof:		lation:
_	lasonry/Concrete teel	∏ Wood ☑ Concr		☐ Wood☐ Concrete		lab-on-grade rawlspace
	/ood	☐ Steel		Steel	Ö B	asement
По	ther	[] Other		[] Other	0	ther
Notes	(Explain Other):					
3.	MECHANICAL SYS	TEMS				
Heatin			_	Cooling:	a a	
	entral HVAC adlator	☐ Wall Electi		☼ Central H ☐ Wall Elec		☐ Window Units ☐ Other
_	805	_		_		. П още
Rejon	(Explain Other):P	ropane Ga	s Heaterg			-
	ARCHITECTURAL F	INISHES				
Ceiling	g: athe and Plaster	Flo.	oring: Vinyl Tile	8	Walls: [] Lathe and	Plastor
j G	ypsum Board		Carpet		Gypsum B	
A []	coustical Finish	0 0	Wood Unfinished		☑ Masonry	. 11
0 0	ther	ä	Other	2	☐ Wood/Pane	aung
Notes	(Explain Other):					
5.	SUMMARY OF DOO	CUMENTS REV	/IEWED			
er e	oor Plans		Sections		Past Abatem	
	echanical Drawings pecifications		As Built Draw Sampling Rep		Past Abatem	ent Spec.s ent Drawing
[Fi	nish Schedules		(In-house)	, orts	☐ Past Survey:	
6.	INSPECTION INFOR	IMATION (Atta	ach copy of c Inspector.)		_	***
₩.	Date of Inspection:					
Inspec		7-19-88	3	Ac	creditation	
	Members	Signature		Nu	mber/State	Affiliation
Gene	Cain				77-Georgia	
						(a T
			LEA: Che	ester County		LEA NO.: 120
			***	D	ate:9/30	700

SCHOOL INFORMATION FORM /SCHOOL: Jacks Creek Elementary NO.: 120-0025

1.

HA No.	Material Description	Material Type (T,S or M)	BIA No.s Included In HA	Sample No.s Taken In HA	HA Drawing No.
1	Vinyl Asbestos Tile	M			0025-1
2	Vinyl Asbestos Tile	М			0025-2
3	Vinyl Asbestos Tile	М			0025-3
4	Vinyl Asbestos Tile	М			0025-4
=	Ceiling Tile	M			All
		-			
					محاليه

Through Out

2.

HA No.	Confli	ACI rmed NF	umed NF	No ACBM	Total Quantity (Show Units)	C	one B	xp Id C	os er: D	ur atlo	ons F	G		Assessment Category
1			х		6401 Sa. Ft	1	1	1	1	3	3	2	4	5
2			х		42 Sq. ₽+	1	1	1	1	3	3	2	4	5
3			х		959 Sg. Ft.	1	1	1	1	3	3	2	4	5
4			х		1512 Sq. Ft	1	1	1	1	3	3	2	4	5
			x		15,000 Sq. Ft.	1	1	1	3	3	3	5	5	5
						_	L		L	L	L	L	L	-
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				1		_	L		L	L	L	_	_	

Exposure Considerations (A through F, rate 1 to 5 with 5 being worst):

A.	Del	eri	orat	lon

B. Physical Damage

C. Water Damage

D. Activity/Vibration

E. Exposure F. Accessibility G. Length of Exposure
1. 1 hr./week
2. 5 hr./week

3. 10 hr./week

4. 20 hr./week 5. 40 hr./week H. Exposure Population

1. Maintenance

2. Maint., Custodial 3. Maint., Cust., Faculty 4. Maint., Cust., Fac., Students 5. Maint., Cust., Fac., Stud., Public

Assessment Categories:

Damaged/Significantly damaged TSI Damaged friable SURFACING ACM

Significantly damaged friable SURFACING ACM Damaged or significantly damaged friable MISCELLANEOUS ACM ACBM with potential for damage

ACBM with potential for significant damage Any remaining friable ACBM or friable suspected ACBM

Legend:

HA = Homogeneous Area

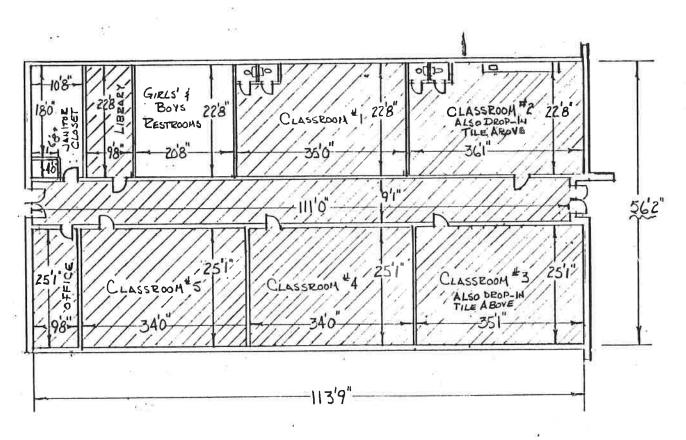
= Thermal System Insulation

S = Surfacing M = Miscellaneous

BIA= Building Inspection Area (Number assigned by Inspector)

LEA:	Chester County	LEA NO.: 120
0.5	Date:	9/30/88

Identify limits of homogeneous area and sample locations.



HOMOGENEOUS AREA A SCALE 1 = 20

VYNI ASBESTOS FLOOR TILE

LEA: Chester County

LEA NO.: 120

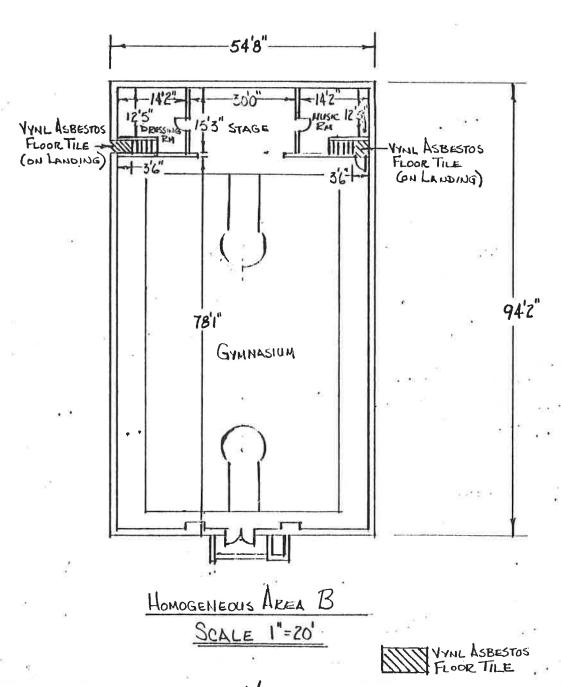
9/30/88 Date:

Page 101 of 209

TAHERA 6.3(8/88)

Identify limits of homogeneous area and sample locations.

5



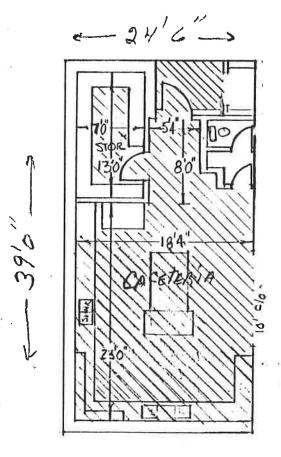
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LEA: , Chester County

LEA NO.: 120

Date: 9/30/88

identify limits of homogeneous area and sample locations.



HONOGENEOUS AREA C SCALE 1"=10'

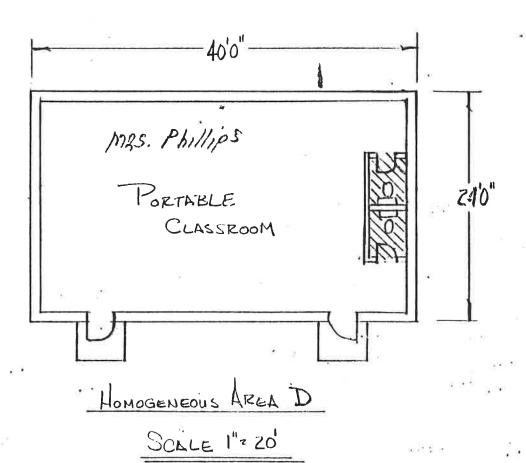
> VYNL ASBESTOS FLOOR TILE

LEA: Chester County LEA NO.: 120

Date: 9/30/88

RAWING NO.: 0025-

identify limits of homogeneous area and sample locations.



FLOOR TILE

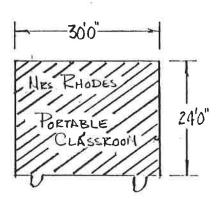
LEA; Chester County

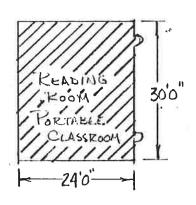
LEA NO.: 120

Date:

9/30/88

Identify limits of homogeneous area and sample locations.





HOHOGENEOUS

SCALE 1": 20'

LEA: Chester County

____ LEA NO.: 120

Date:

9/30/88

1. Recommended by Management Planner

J.	HA ACBM Management Planner No. Description Recommended Response Action		LEA Selected Response Action*	Schedule Dates Start Complete		
	1	Vinyl Asbestos Tile	А-В	A-B	July 1989	Until Removed
	2	Vinyl Asbestos Tile	A-B	A-B	July . 1989	Until Removed
	3	Vinyl Asbestos Tile	А-В	A-B	July 1989	Until Removed
	4	Vinyl Asbestos Tile	А-В	A-B	July 1989	Until Removed
Through, Out		Ceiling Tile	A-B	» A–B	July 1989	Until Removed
						9
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Management Planner's method for selection of response actions:

Response actions based on hazard ranking required by AHERA Section 763.90

*If different than recommended action, explain:

Appropriate Response Actions:

A. Institute Preventative Measures

B. O & M Program

C. Repair

D. Encapsulate

E. Enclose

F. Remove

G. Isolate

H. Other (Explain)

LEA:	Chester	County		LEA	NO.:	120
100	(9 .)	Date:	9-30-88			

TAHERA 6.4(8/88)

Page __ of __

(Use separate sheet for each response action listed on Form TAHERA 6.4)

1.	RE	SP	ONSE	ACT	ION:
----	----	----	------	-----	------

Institute Preventative Measures Operations and Maintenance Program Repair	Enclose Remove
Repair Isolate	[] Encapsulate

Notes (Explain Other): Ceiling Tile

2. DETAILED DESCRIPTION:

Incorporate these areas/materials into an Operations and Maintenance Program until major renovation or demolition requires removal under NESHAPS or until hazard assessment factors change.

3. LOCATIONS (List all HA No.s, BIA No.s or attach Drawing):

Throughout

4. REASONS (Give reason for selecting response action):

This material is not very friable, is in good condition and is not easily accessible, and does not present a health hazard in its present condition.

5. SCHEDULE (Starting and completion dates for response action):

Begin May 9, 1989 and continue as long as this material remains in the building.

6. RESOURCES NEEDED (Additionally, list funding sources, if known):

Include in general Operations and Maintenance Program with removal costs estimated at \$3.00 - \$4.50 per square foot.

 NOTIFICATION PLAN (Describe method of Notification and include dated copy of actual Notifications, meeting minutes, newspaper articles, etc. in Appendix):

All parent's, teacher's, employee's organizations and school groups will be informed in writing of the location of the ACM and the location of the Management Plan. The Management Plan will go into effect July 9,1989. The periodic surveillance will be in January of 1990 and each six months thereafter. In three years after July 9, 1989, all schools will be reinspected as described in AHERA 763.85 (b).

- 2. PERIODIC SURVEILLANCE PLAN: LEA shall perform Periodic Surveillance at least every six (6) months from date of Management Plan Implementation (Report surveillance on Form TAHERA 9.0).
- described in Paragraph 763.85(b) of AHERA and shall include performance by an accredited inspector; frequency (at least every three (3) years); address all friable and nonfriable, known or assumed ACBM; visual reinspection and reassessment; touching of material to determine changes of condition; identification of homogeneous areas where material has become friable since the last inspection; sampling of areas assumed to contain ACBM; reassessment of areas where condition of materials has changed; recording of dates of reinspection; changes of conditions of materials; exact sample locations; manner used to determine sampling locations; and names and signatures of persons making the reinspection, taking samples and reassessing the materials, accreditation numbers and states of accreditation.
- 4. PROGRESS REPORTS: Progress Reports on Management Plan Implementation are to be submitted to the State AHERA Designated Person no later than July 9 of each year beginning 1990. These reports are to include each completed response action, each response action in progress, how these response action schedules compare with the Management Plan schedule, results of Reinspections and Surveillances, a summary of Operations and Maintenance activities and resources needed to continue implementation of the Management Plan. Copies of the Progress Reports should be placed in the Appendix to the Management Plan.
- 5. DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: July 9, 1989

LEA:_	Chester	County	LEA NO.: 120		
(16)		Date:	9/30/88		

September 21, 1988

TO: Principal, Teachers, Lunchroom Employees, Custodians, Maintenance Employees and Parent Organizations

FROM: Dr. Kathy Coatney Mays

SUBJECT: EPA Rule 763.93 (G) (4) concerning non-friable asbestos at the Jacks Creek Elementary School.

EPA Rule 763.93 (G) (4) requires the local education agency to notify in writing of the availability of the management plan.

The management plan is located in the Principal's Office and may be seen at their convenience.

INFORMING BUILDING OCCUPANTS

Asbestos is a potential health hazard.

Material containing asbestos has been found in the building.

The ACM is currently in good condition and should not present a danger unless damaged or disturbed.

Avoid disturbing the ACM (e.g., do not hang plants or pictures on the ACM, do not puch furniture against the ACM, do not remove ceiling tiles).

Report any evidence of disturbance or damage.

Cleaning and maintenance personnel are taking special precautions during their work to properly clean up asbestos debris and to guard against disturbing the ACM.

All ACM is inspected periodically and additional measures will be taken when needed to protect the health of building occupants.

Report any dust or debris from ACM, any change in the condition of the ACM, or any improper action of building personnel to:

Gene Cain, 901/427-1561

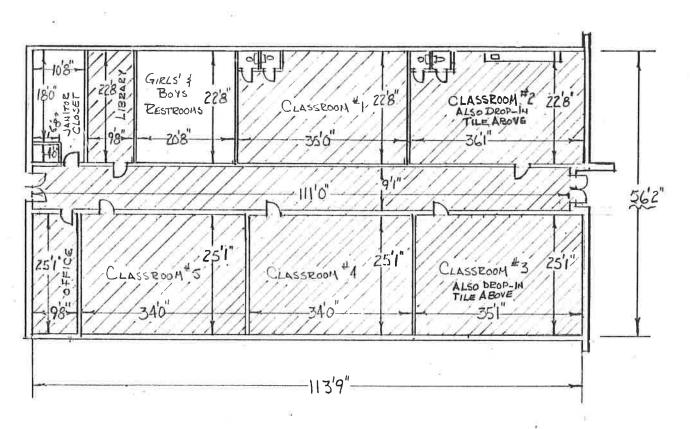
The ACM is found in the following locations:

Areas 1, 2, 3, 4—Floor tile in the halls, classrooms, library, office, two portable classrooms, two landings from the stage, cafeteria and kitchen.

DRAWING OF ACBM	TO REMAIN	SCHOOL:_Ja	cks Creek	Elementar	y School	NO.:120-0
Identify type and extent of response actions.						380
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2	SEE	ATTACHED S	HEET			4 169
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A			Date:	9/30/8	38	
TAHERA 6.7(8/88)	я п	Page <u>10</u> 9of	209			

NO.:<u>120-</u>0025

Identify limits of homogeneous area and sample locations.



HOMOGENEOUS AREA A SCALE 1"-20

VYNL ASBESTOS FLOOR TILE

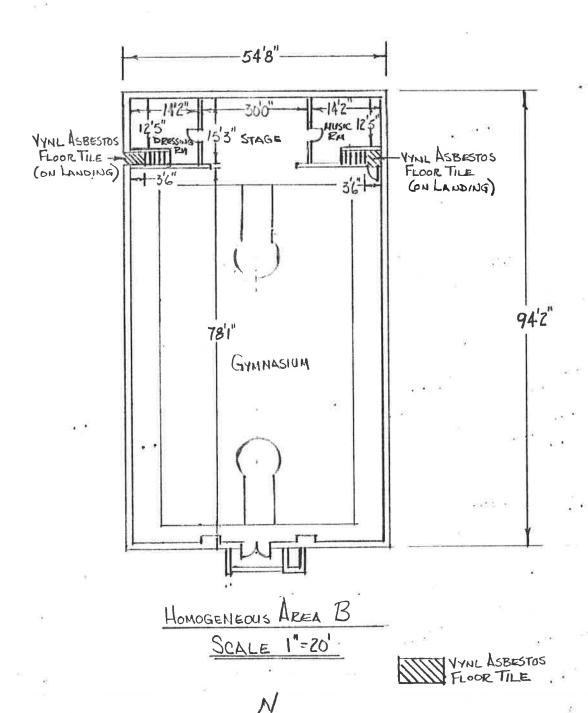
LEA: Chester County

LEA NO.: 120

9/30/88 Date:

DRAWING NO .: _

Identify limits of homogeneous area and sample locations.



LEA: Chester County LEA NO.: 120

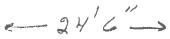
> Date: 9/30/88

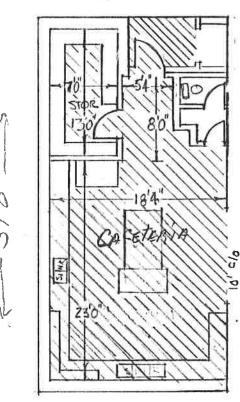
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TAHERA 6.3(8/88)

DRAWING NO.: 0025-3

identify limits of homogeneous area and sample locations.





HOMOGENEOUS AREA C SCALE 1"=10

VYNL ASBESTOS FLOOR TILE

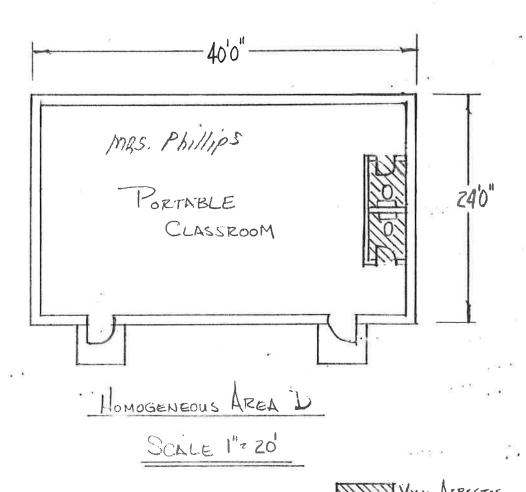
LEA: Chester County

____ LEA NO.: 120

Date:

9/30/88

Identify limits of homogeneous area and sample locations.

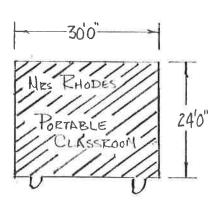


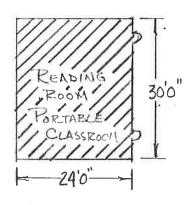
LEA: Chester County LEA NO.: 120

> 9/30/88 Date:_

identify limits of homogeneous area and sample locations.

·S





HOMOGENEOUS AREA

SCALE 1"=20"

H

LEA: Chester County

LEA NO.: 120

Date: 9/30/88

TAHERA 6.3(8/88)

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In areas 1,2,3 and 4, there is assumed asphalt floor tile. This is a hard surface which releases fibers only when cut, drilled, sawed, broken or sanded. When cleaning the tile, these steps will be followed:

- I. The floor is to be cleaned using water and detergents with no chemicals."
- II. The floor is never to be sanded.
- III. All floors should be wet-mopped and all other horizontal surfaces such as the tops of light fixtures and file cabinets should be wiped with a damp cloth.
- IV. Custodians will be instructed to avoid dropping anything which may damage the tile.
- V. No dry brooms, mops or dust cloths are to be used on the tile.
- VI. A good coat of commercial grade wax is to be kept on the tile at all times.
- VII. In case of a piece of tile breaking, the following shall be observed:
 - A. The area is to be marked off.
 - B. Signs posted to prevent entry.
 - C. All HVAC units in the area closed down.
 - D. Maintenance men will come in with proper equipment afer school or at night and make necessary repairs.
 - ${\tt E.}$ The wet cleaning method with HEPA filtered vaccum will be used for clean , up.
 - F. All debris will be disposed of according to EPA regulations.
 - G. For major fiber release, the building will be closed down and a company accredited to remove asbestos shall be called in.
 - H. All records of the cleaning of the tile, name, date and method used, must be kept in the Principal's office.

LEA: Chester County LEA NO.: 120

Date: 9/30/88

This plan deals with non-friable ACM and friable TSI which will become non-friable when it is repaired. Most of the TSI is isolated in the boiler rooms of Chester County High School and North Chester Elementary School.

- I. All Principals, Teachers, Lunchroom Employees, Custodians, Maintenance Employees, Students, Parents and Parent Organizations will be notified of the location of the ACM and location of the Management Plan. (See Copy of Notification)
- II. All ACM in the floor tile must be cleaned using the wet method for cleaning and all records of the cleaning of the building must include names, dates and method used. This record will be kept in the Principal's office. The cleaning of the friable TSI will be with the wet wipe system and the HEPA Vaccum. All maintenance men performing this operation will wear an air purifying negative pressure respirator with HEPA filters and protective clothing (suits, hoods and boots). Any debris will be placed in an air tight bag and then a drum for proper disposal.
- III. Should there be a small scale fiber release, the plan for Disturbance of ACM Intended or Likely TSI will be followed. (See Attached Sheets)
- IV. All employees that wear a respirator must have a pulmonary function test or breathing test.
 - V. All custodians and maintenance personnel will receive two hours of a-warness training (T.H.E.-/A.C.T.-/AHERA compliance film plus one hour of discussion of the film). Each will receive a copy of of Asbestos In Buildings Guidance for Service and Maintenance Personnel. Each maintenance man will also receive 14 additional hours of training:
 - A. Respirator for asbestos and filtering 1 hour
 - B. HEPA vaccum cleaner for asbestos clean up 1 hour
 - C. Maintaining asbestos covered pipes and surfaces 2 hours
 - D. Practicing use of glove bag 5 hours
 - E. Repairing TSI with Lag-Kap, Lag-Kloth and Lag-Kote 😑 5 hours
- VI. All service personnel from outside of the school must report to the Principal's office before any work can begin. At this time they will be informed of any ACM.
- VII. The ACM in each area will be inspected by a maintenance man and the date, time and condition of the ACM recorded. This will be kept in the Principal's office. The re-inspection will be in 3 years from July 9, 1989, and it will follow AHERA 763.93 (E) (9).
- VIII. All records of activities involving ACM will be kept in the Principal's office.
 - A. Employee training
 - 1. Name
 - 2. Job Title
 - 3. Date training was completed

(continued)

LEA:	Chester	County	County		NO.: 120
		Date:_	9/30/88		

OPERATIONS AND MAINTENANCE PROCEDURES

- Location of training
- Number of hours completed
- B. Initial Cleaning
 - Name of each person performing the cleaning
 - 2. Date of cleaning
 - 3. Location
 - 4. Method used
- C. O and M Activities
 - Name of person performing the activity
 - Start and completion dates
 - 3. Location
 - 4. Description of activity
- D. For Small Scale Fiber Release
 - Date and location of episode
 - Method of repair
 - Name of person performing the work
- E. For large scale fiber release the school will be closed and a contractor certified to do the work will be called in.
 - Name and signature of the contractor
 - State of accreditation
 - Accreditation number
 - Start and completion dates
 - 5. Location of activity
 - 6. Description of activity
 - 7. If ACM is removed, name and location of storage or disposal sites

LEA: Chester County LEA NO.: 120

Date: 9/30/88

Page 170 of 209

This is to certify that

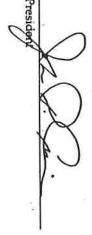
GENE E. CAIN

has successfully completed

Inspecting Buildings For Asbestos
Containing Materials

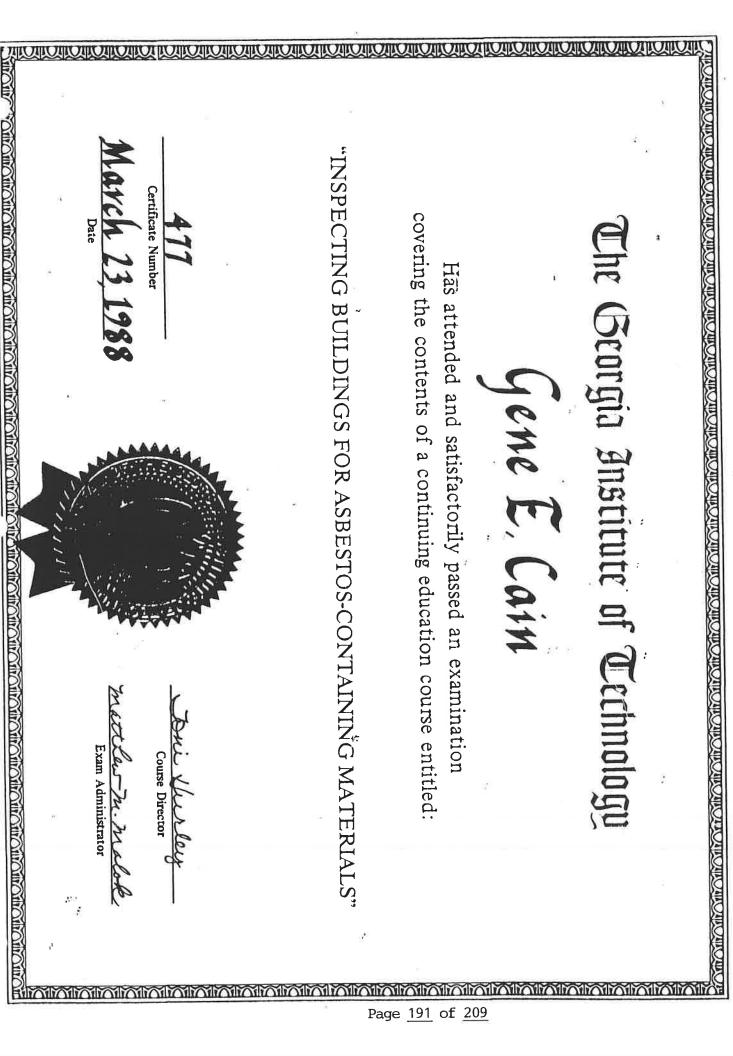
conducted by
GEORGIA TECH
EDUCATION EXTENSION SERVICES
Atlanta, Georgia

MARCH 21-23, 1988









The Georgia Institute of Tec

Gene E. Cair

covering the contents of a continuing education course entitled: Has attended and satisfactorily passed an examination

"MANAGING ASBESTOS IN BUILDINGS"



March 25 19:

Certificate Number

TOIONT

This is to certify that

GENE E. CAIN

has successfully completed

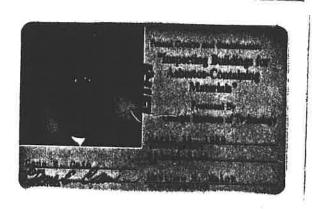
Managing Asbestos in Buildings

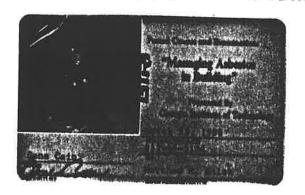
conducted by GEORGIA TECH EDUCATION EXTENSION SERVICES

Atlanta, Georgia MARCH 24-25, 1988









QUALITATIVE RESPIRATOR FIT TEST
Name: GENE E. CAIN
Social Security No.: 415-44-5134
Respirator Type: 1/21th 7760
Size
By: P. Schmitter Date: 3/22/88
Georgia Tech Research Institute

September 21, 1988

TO: Principal, Teachers, Lunchroom Employees, Custodians, Maintenance Employees and Parent Orgianizations

FROM: Dr. Kathy Coatney Mays

SUBJECT: EPA Rule 763.93 (G) (4) concerning the friable and non-friable asbestos at Chester County High School.

EPA Rule 763.93 (G) (4) requires the local education agency to notify in writing of the availability of the management plan.

The management plan is located in the Principal's office and may be seen at their convenience.

INFORMING BUILDING OCCUPANTS

Asbestos is a potential health hazard.

Material containing asbestos has been found in the building.

The ACM is currently in good condition and should not present a danger unless damaged or disturbed.

Avoid disturbing the ACM (e.g., do not hang plants or pictures on the ACM, do not push furniture against the ACM, do not remove ceiling tiles).

Report any evidence of disturbance or damage.

Cleaning and maintenance personnel are taking special precautions during their work to properly clean up asbestos debris and to guard against disturbing the ACM.

All ACM is inspected periodically and additional measures will be taken when needed to protect the health of building occupants.

Report any dust or debris from ACM, any change in the condition of the ACM, or any improper action of building personnel to:

Gene Cain, 901/427-1561

The ACM is found in the following locations:

- Area 1 Lobby & Office Asphalt floor tile.
- Area 2 Storage room, workroom, two restrooms, Biology Room Asphalt floor tile.
- Area 3 Gym, corridors beside gym, Girls PE Office Asphalt floor tile.
- Area 4 Varsity dressing room, study hall, bookroom, classroom, Teachers Lounge - Asphalt floor tile.
- Area 5 Home Economics, General Science, Physics Room Asphalt floor tile.
- Area 6 Library, eight classrooms, conference room, counselors room Vinyl asbestos floor tile.
- Area 7 Auditorium Pipe wrappings in womens restroom, lobby, janitorial closet, dressing room on stage and overhead around stage.
- Area 8 Cafeteria and Kitchen Inlayed linoleum in cafeteria, storage room in kitchen and locker room - Vinyl asbestos floor tile.
- Area 9 Boiler Room Pipe wrappings and hot water tank.
- Area 10 Agriculture Building Corridors, bookstore and classrooms have vinyl asbestos floor tile. Pipe wrappings in boiler room, shop and shop restroom.
- Area 11- Business Building All classrooms have vinyl asbestos floor tile.
- Area 12 Vocational School Hall and storage, janitorial room, hall leading to stairs, landing on stairs, hall between shops and locker area, three office areas, janitorial closet and storage room upstairs on the right vinyl asbestos floor tile. Pipe wrappings on the elbows of hot water tank.

EMPLOYEE TRAINING FORM	Maintenance & Custadeal
	Period of Instruction: 3 Hrs.
Subject Matter Covered: T.H.E. A.C.T two	hour employee A.H.E.R.A. compliance
training and dis	scussion.
Marion C-Paug Owy Willing Lathy Galney Mary	Jonator Jr. High School Jantor Jr. High School Land Deyrentedet
* LEA Designated Person certifies that the the above described AHERA Compliance LEA Designated Person: Gene Cain	Training Program.
Signature:	Min
₹e Na	Date: 9/30/88

EMPLOY E TRAINING FORM

Location of Training: Chester C	ounty High School
$\alpha l \cdot l$	Period of Instruction: 2 Hrs.
Instructor (Print Name):	ein
Subject Matter Covered: Maintaining asbe	estos covered pipes and surfaces.
ATTENDEES:	
NAME (Print)	JOB TITLE
Dewy Wille	- Maint.
Stond H Kinn	
	%±0°
	*
######################################	•••
···	•
fern 3	*
	**
LEA Dada A A D	•
LEA Designated Person certifies that the paths above described AHERA Compliance	person Indicated attended Training Program.
EA Designated Person: Gene Cain Signature:	Un
5 L	EA: Chester County LEA NO.: 120
	Date: 9/30/88

TAHERA 11.0(8/88)

Page 199 of 209

00-10	. 0 +0				
Location of Training: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	y Courthouse				
Date: 92/1988 Period	of Instruction: 1 Hrs.				
Instructor (Print Name): Bene Cain					
Subject Matter Covered: Respirators for asbestos and fitting.					
ATTENDEES:					
NAME (Print)	JOB TITLE				
Quellle	Nant				
Stepl H King	10 11				
	*				
8.45	*				
*	99 I				
	*				
* LEA Designated Person certifies that the person the above described AHERA Compliance Train	Indicated attended				
LEA Designated Person: Gene Cain	'Chu'				
Signature: <u> </u>					
; LEA:	Chester County LEA NO.: 120				
¥ 2	Date: 9/30/88				

Page 200 of 209

EMPLOYEE TRAINING FORM

Location of Training: he ter Counter		4.
Date: 9/2// 1988 Perf	od of Instruction: 1 Hrs.	
Instructor (Print Name): Gene Cai	Λ	
Subject Matter Covered: HEPA vacuum cleaner	for asbestos cleanup.	
ATTENDEES:	10 201	
NAME (Print)	JOB TITLE	0
Que 1 the	Norms.	*
Short HKmy	11 1/	*
	***	*
136		*
1) (i) (ii) (ii) (iii) (
**************************************	· · · · · · · · · · · · · · · · · · ·	*
*	<u> </u>	*
		*
* LEA Designated Person certifies that the person the above described AHERA Compliance Train	on Indicated attended	ş
LEA Designated Person: Gene Cain Signature: June Cain	Uni	
Sa LEA:	Chester County LEA NO.	:_120
	Date: 9/30/88	

Page 201 of 209

Location of Training: Charles Country High Seleal							
Date: 9-24-1988 Period of Instruction: 5 Hrs.							
Instructor (Print Name): Gene	Cain						
Subject Matter Covered: Repairing TSI with Lag-Kap, Lag-Kloth and Lag-Kote.							
ATTENDEES:							
NAME (Print)	JOB TITLE						
Dung W. Il	Memi	t t					
Sleyd A King	1/ 1/	r.					
	***	F					
er ver							
y		5802					
		e.					
4.7		E (
	****	r.					
* LEA Designated Person certifies that the	a parson indicated attended	Ė					
the above described AHERA Compliance	e person indicated attended ce Training Program.						
LEA Designated Person: Gene Cai:	in						
Signature:	Aller						
		-					
Sij	LEA: Chester County LEA NO.: 120 Date: 9/30/88)					

TAHERA 11.0(8/88) Page 202_{of} 209

EMPLOYEE TRAINING FORM

Location of Training: Che ter Core	sty High School
Date: 9-24-1988 Perlo	d of Instruction: 5 Hrs.
* *	
Instructor (Print Name): Gene Cair	1
Subject Matter Covered: Practice use of glo	ve bag.
ATTENDEES:	3.50
NAME (Print)	IOD TITLE
Den Will	Marini
Jelay HKny	
	720 75.8
(a)	<i>'</i>
Sec.	*
	*
* LEA Designated Person certifies that the person the above described AHERA Compliance Training	Indicated attended g Program.
LEA Designated Person: Gene Cain	
Signature:	<u> </u>
31	
LEA:	<u> </u>
	Date: 9/30/88

TAHERA 11.0(8/88)

CLEANING REC	CORD /	SCHOOL	Chester	County	High
--------------	--------	--------	---------	--------	------

NO.: 120-0005

1. Locations cleaned:

All of the floors in the building.

2. Cleaning methods used (pursuant to 40 CFR 763.91[a]):

Wet method of cleaning used.

3. Names of persons performing cleaning and training dates:

All of the custodians of the Chester County schools.

- 1. Gail Ross
- 2. Glenda Kay Climer
- 3. R.C. Burross
- 4. J.R. Edgar
- 5. W.T. Hepsmith

- 6. Thomas Maness
- 7. Isiah Ross
- 8. William Spencer
- 9. Johnny Hayes
- 10. Marian C. Davis

Training date for all above: 9/21/88

- 4. Date cleaning performed: 6/21-24--7/12-15-/88
- 5. LEA Designated Person: Gene Cair

Signature: Office der

Date: 9/30/88

LEA: Chester County LEA NO.: 120

Date: 9/30/88

1.	Locations	-leane	٦.
1.0	LUCALIUIIS	Cidaile	u.

All of the floors in the building.

2. Cleaning methods used (pursuant to 40 CFR 763.91[a]):

Wet method of cleaning used.

- 3. Names of persons performing cleaning and training dates:
 - 1. Gail Ross

- 6. Thomas Maness
- 2. Glenda Kay Climer
- 7. Isiah Ross

3. R.C. Burross

8. William Spencer

4. J.R. Edgar

9. Johnny Hayes

5. W.T. Hepsmith

10. Marian C. Davis

Training date for all above: 9/21/88

- 4. Date cleaning performed: 7/18-27/88
- 5. LEA Designated Person: Gene Cain.

Signature: Signature:

Date: 9/30/88

LEA: Chester County

LEA NO.: 120

Date: 9/30/88

1 9	Locations	cleaned:

Cleaning methods used (pursuant to 40 CFR 763.91[a]): 2.

Wet method of cleaning used.

- Names of persons performing cleaning and training dates: 3.
 - 1. Gail Ross
 - 2. Glenda Kay Climer
 - 3. R.C. Burross

 - 4. J.R. Edgar 5. W.T. Hepsmith

- 6. Thomas Maness
- 7. Isiah Ross
- 8. William Spencer
- 9. Johnny Hayes
- 10. Marian C. Davis

Training date for all above: 9/21/88

- Date cleaning performed: 7/28-8/13/88 4.
- Gene Cair 5. LEA Designated Person:

9/30/88 Date:____

> **LEA NO.:** 120 LEA: Chester County

9/30/88 Date:

1	Loca	tions	clas	nad.
	LOCA		GIUA	uieu.

Cleaning methods used (pursuant to 40 CFR 763.91[a]): 2.

Wet method of cleaning used.

- Names of persons performing cleaning and training dates: 3.
 - 1. Gàil Ross

- 6. Thomas Maness7. Isiah Ross
- 2. Glenda Kay Climer

3. R.C. Burross

8. William Spencer

4. J.R. Edgar

9. Johnny Hayes

5. W.T. Hepsmith

10. Marian C. Davis

Training date for all above: 9/21/88

- 6/13-17/88 Date cleaning performed: 4 .
- LEA Designated Person. Gene Cain 5.

Signature:

9/30/88 Date:

LEA NO.: 120 Chester County Date: 9/30/88

1	1 -	4			1-	_			
1:2	Lo	cat	lon	8 C	Ia	aı	18	a	•

2. Cleaning methods used (pursuant to 40 CFR 763.91[a]):

Wet method of cleaning used.

- 3. Names of persons performing cleaning and training dates:
 - 1. Gail Ross
 - 2. Glenda Kay Climer
 - 3. R.C. Burross
 - 4. J.R. Edgar
 - 5. W.T. Hepsmith

- 6. Thomas Maness
- 7. Isiah Ross
- 8. William Spencer
 - 9. Johnny Hayes
- 10. Marian C. Davis

Training date for all above: 9/21/88

- 4. Date cleaning performed: 6/3-10/88
- 5. LEA Designated Person: Gene Cain-

Signature:

Date: 9/30/88

LEA: Chester County LEA NO.: 120

Date: 9/30/88

4	Locations	alaanadı
1.7	I CMCMURALIZA	CIDOMENTOCIA

Cleaning methods used (pursuant to 40 CFR 763.91[a]): 2.

Wet method of cleaning used.

- Names of persons performing cleaning and training dates: 3.
 - 1. Gail Ross
 - 2. Glenda Kay Climer
 - 3. R.C. Burross
 - 4. J.R. Edgar
 - 5. W.T. Hepsmith

- 6. Thomas Maness
- 7. Isiah Ross
- 8. William Spencer
- 9. Johnny Hayes
- 10. Marian C. Davis

Training date for all above: 9/21/88

- 5/27-6/2/88 Date cleaning performed: 4.
- Gene Cain 5. LEA Designated Person:

Signature:

9/30/88 Date:

> Chester County **LEA NO.:** 120 9/30/88 Date:



P. O. Box 327 Henderson, Tennessee 38340

Telephone 901/989-5134

Linda Patterson

KATHY COATNEY MAYS, Superintendent

MEMO

TO:

Principals

FROM:

Kathy Coatney Mays Kathyloutn

SUBJECT:

Asbestos Plan

DATE:

January 7, 1991

The attached copy should be put with your asbestos managment plan for reference. These surveillance reports must be completed every six months.

Thank you for your attention to this matter.

KCM:cb

1. Fill out every six (6) months and insert in Appendix of Management Plan

HA No.	Description of ACBM	Area inspected	Change in Condition (if any)
1	Vinyl Asbestos Tile	All	None
2	Vinyl Asbestos Tile	All	None
3	Vinyl Asbestos Tile	All	None
4	Vinyl Asbestos Tile	All	None
6	Vinyl Asbestos Tile	All	None
7	Vinyl Asbestos Tile	All	None
8	Vinyl Asbestos Tile	All	None

2. Attach proof, sign-off sheets, notices, etc. that Paragraphs 2 and and 3 on the Assurances Guide Document (TAHERA 3.0) have been properly followed through.

Surveillance Inspector's* Signature:

Surveillance Inspector's Name:

Gene Cain

AHERA Accreditation Number/Date (if applicable):

*Surveillance Inspector is not required to be AHERA certified. If not, indicate any relevant asbestos or AHERA training:

LEA Designated Person Signature:

Dated: 12-27-90

LEA: Chester	County		LEA NO.: 120
		1	
	Date:	12-27-90	

TAHERA 9.0(8/88)

Page ___ of ___

Fill out every six (6) months and insert in Appendix of Management 1. Plan

HA No.	Description of ACBM	Area Inspected	Change in Condition (if any)		
9	Vinyl Asbestos Tile	A11	None		
			ig is		
	K _e				

2. Attach proof, sign-off sheets, notices, etc. that Paragraphs 2 and and 3 on the Assurances Guide Document (TAHERA 3.0) have been properly followed through.

12-27-90 Date of Surveillance: Surveillance Inspector's* Signature: Gene Cain Surveillance Inspector's Name: AHERA Accreditation Number/Date (if applicable): 455 - 3/27/90 *Surveillance inspector is not required to be AHERA certified. If not, Indicate any relevant asbestos or AHERA training: LEA Designated Person Signature:___ Dated: 12-27-90

Chester County LEA:

____ LEA NO.:_120

12-27-90 Date:

TAHERA 9.0(8/88)

Page ___ of __



P. O. Box 327 Henderson, Tennessee 38340

Telephone 901/989-5134



KATHY COATNEY MAYS, Superintendent

MEMO

TO:

Principals

FROM:

Kathy Coatney Mays tathy leatney Ways

SUBJECT:

Asbestos

DATE:

October 23,1990

Attached you will find Managing Asbestos In Place, A Building Owner's Guide to Operations and Maintenance Programs for Asbestos-Containing Materials.

Please place this in your asbestos file for future reference and for monitoring by the E.P.A.

KCM:ke

DWAIN SEATON, Chairman Route 2, Beech Bluff BILL MOORE, Vice-Chairman 1271 W. Main, Henderson



P. O. Box 327 Henderson, Tennessee 38340

Telephone 901/989-5134

KATHY COATNEY MAYS, Superintendent

September 4, 1990

Mr. Bill Cobb State of Tennessee Department of Finance and Administration Division of Facilities Management Suite 206, John Sevier Building Nashville, Tennessee

Dear Mr. Cobb:

Please find enclosed Chester County School System's progress report:

- Inspection and periodic surveillance has been conducted.
- II. Workers and building occupants, or their legal guardians, are informed at least once each school year of response actions and presence of asbestos.
- III. All custodial employees have had at least two hours of awareness training.
- IV. All schools were cleaned by the wet method after inspection.
- V. All maintenance employees have had sixteen hours of training.
- VI. All maintenance employees have a medical check up each year.
- VII. All pipe and boiler insulation has been restored to its original condition.
- VIII. Signs have been placed in all boiler rooms as needed.
- IX. Short term workers who may come in contact with asbestos in a school are being informed of its presence.
- X. The local representative has completed approved training courses in inspection, management planning, and supervision of abatement.
- XI. All small scale disturbances have been reported to the state.

Sincerely,

Kathy Coatney Mays, Superintendent

Chester County Schools

KCM:cb

DWAIN SEATON, Chairman Route 2, Beech Bluff BILL MOORE, Vice-Chairman 1271 W. Main, Henderson



P. O. Box 327 Henderson, Tennessee 38340

Telephone 901/989-5134

KATHY COATNEY MAYS, Superintendent

MEMO

TO:

Principals Jinda Patterson

FROM:

Kathy Coatney Mays Xoll

SUBJECT:

Asbestos Inspection

DATE:

January 4, 1990

I am attaching a copy of the Asbestos Periodic Surveillance Report for your school. This report is to be filed in your Asbestos Management Plan in the Appendix.

KCM:cb

DWAIN SEATON, Chairman Route 2, Beech Bluff BILL MOORE, Vice-Chairman 1271 W. Main, Henderson

LEA NO.: 120

Date: 12/20/89

1. Fill out every six (6) months and Insert in Appendix of Management Plan

HA No.	Description of ACBM	Area Inspected	Change in Condition (if any)
1	Vinyl Asbestos Tile	All	None
2	Vinyl Asbestos Tile	All	None
3	Vinyl Asbestos Tile	All	None
4	Vinyl Asbestos Tile	All	None
6	Vinyl Asbestos Tile	All	None
7	Vinyl Asbestos Tile	All	None
8		All	None

2. Attach proof, sign-off sheets, notices, etc. that Paragraphs 2 and and 3 on the Assurances Guide Document (TAHERA 3.0) have been properly followed through.

Date of	Surveillance: 12/13/89
Surveil	lance Inspector's* Signature:
Surveil	lance Inspector's Name: Gene Cain
AHERA	Accreditation Number/Date (if applicable): 161 - 3/21/89
	illance inspector is not required to be AHERA certified. If not, ate any relevant asbestos or AHERA training:
LEA De	esignated Person Signature: <u>Hone Coer</u>
Dated:	12/20/89

Page ___ of ___

LEA: Chester County

Fill out every six (6) months and insert in Appendix of Management 1: Plan

HA No.	Description of ACBM	Area Inspected	Change in Condition (if any)
9	Vinyl Asbestos Tile	All	None
	T.		
			9
	**		

2. Attach proof, sign-off sheets, notices, etc. that Paragraphs 2 and and 3 on the Assurances Guide Document (TAHERA 3.0) have been properly followed through.

Date of Surveillance: 12/13/89 Surveillance Inspector's* Signature:_ Surveillance Inspector's Name: Gene Cain AHERA Accreditation Number/Date (if applicable): 161 - 3/21/89 *Surveillance inspector is not required to be AHERA certified. If not, indicate any relevant asbestos or AHERA training: LEA Designated Person Signature: Dated: 12/20/89

LEA: Chester County LEA NO.: 120

Date: 12/20/89

Page __ of __

٠.	#1 [X] (1st six mont	hs) Date 12-30-92			
	#2 [] (2nd six mont	hs) Date			
==		act Chaster Flementary			
	3	months for each school in dinsert in Appendix of	building and include i Management Plan.)		
IA Io	Description of ACBM	Area Inspected	Change in Condition (if any)		
	Floor Tile	A11 '	None		
2	Floor Tile	All	None		
3	Floor Tile	All	None None		
1	Floor Tile	All			
5	Floor Tile	All	None		
7	Floor Tile	All	None		
3	Floor Tile	All	None		
9	Floor Tile	All	None		
	*				
		* .			
Sur	•	Name: Gene Cain per/Date (if applicable)*			
:St	rveillance Inspector	is not required to be AH	ERA certified.		

Date: 12-30-92

SAFETY • TRAINING • ECOLOGY • DESIGN

201 SOUTH MAIN STREET, SUITE #1
COVINGTON, TENNESSEE 38019
(901) 476-4973

CERTIFICATE OF COMPLETION

EDDIE MILLER

has successfully completed and passed an examination for the course of

EPA/AHERA Approved Accreditation Course

Management Planner Course December 2 - 3, 1993 Covington, Tennessee

This course has been approved by the State of <u>IDAHO</u> and the United States Environmental Protection Agency and is pursuant to current AHERA regulations

MP010

Certificate Number

12/03/1993

Examination Date

12/03/1994

Date of Expiration

Classroom Instructor

Field Instructor

Director of Programs

Asbestos

CERTIFICATE OF ACHIEVEMENT



Awarded to

LARRY EDDIE MILLER

In accordance with EPA TSCA Title II accreditation standards for successful completion of the

Asbestos Management Planner Refresher Training Course

431-53-1229

Certificate Number

MAY 20, 1998

Examination Date

MAY 20, 1998

Course Date

MAY 20, 1999

Expiration Date

Asbestos REFRESHER

Environmental Technologies

P. O. Box 21243 Little Rock, AR 72221 (501) 580-4284

sbestos

CERTIFICATE OF ACHIEVEMENT



Awarded to

LARRY EDDIE MILLER

In accordance with EPA TSCA Title II accreditation standards for successful completion of the

Asbestos Management Planner Refresher Training Course

431-53-1229

Certificate Number

May 19, 1999.

Examination Date May 19, 1999.

Course Date

May 19, 2000

Expiration Date

Asbestos REFRESHER

Environmental Technologies

P. O. Box 21243 Little Rock, AR 72221 (501) 580-4284

SAFETY • TRAINING • ECOLOGY & DESIGN, INC. 215 EAST LIBERTY AVENUE COVINGTON, TN 38019 (901) 476-4973

CERTIFICATION OF COMPLETION

this certifies that

Eddie Miller

has attended, successfully completed and passed an examination, as required under TSCA, Title II, for the course covering the contents of Model EPA curriculum for

Asbestos Building Inspector/Management Planner Annual Refresher Training Course

May 18th, 2000 in Memphis, Tennessee

This course has been approved by the State of Florida and the United States Environmental Protection Agency under section 206 (a) of TSCA, 15 U.S.C. 264 (a)

BIMPR431-53-1229 Certificate Number

May 18th, 2000 Examination Date

May 18th, 2001 Expiration Date Classroom Instructor

Melanie M. Wright, Course Administrato



Certificate # 7ME01187306MPR004

This is to certify that

Eddie Miller

completed the requirements for asbestos accreditation under Section 206 of TSCA, Title II, 15 U.S.C. 2646 has on 01/18/01, in MEMPHIS, TN

AHERA Asbestos Management Planner Recertification Course

on 01/18/01 - 01/18/01 and passed the associated examination on 01/18/01 as approved by the U.S.E.P.A. under 40 C.F.R. 763 (AHERA) with a score of 70% or better

CM =

ANSAS

MAYHEW

Instructor

Dresident

Soc. Sec #: 431-53-1229 Accreditation Expires: 01/18/02

TRAINING

TA - P.O. Box 786

Lawrence KS 66044

800-444-6382

Asbestos

CERTIFICATE OF ACHIEVEMENT

Awarded to

EDDIE MILLER

In accordance with EPA TSCA Title II accrediation standards for successful completion of the

Asbestos Management Planner Refresher Training Course

431-53-1229

Certificate Number

January 23, 2002

Examination Date

January 23, 2002

Course Date

January 23, 2003

Expiration Date

Asbestos REFRESHER

Environmental Technologies

P.O. Box 21243

Little Rock, AR 72221

(501) 425-9585

Asbestos

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Little Rock, AR 72221

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AHERA YEARLY PROGRESS REPORT PACKAGE



DEPARTMENT OF FINANCE AND ADMINISTRATION
CAPITAL PROJECTS MANAGEMENT
ENVIRONMENTAL PROGRAMS

ANNUAL PROGRESS REPORT INSTRUCTION GUIDE

This packet contains the forms necessary to complete the AHERA Annual Progress Report. This packet should be completed every year and <u>SUBMITTED BY JULY 9</u> to:

STATE OF TENNESSEE Capital Projects Management Environmental Programs Section Suite 500, 511 Union Street Nashville, TN 37243-0300

Attention: George G. Brummett, Jr.

This packet was developed to help Local Education Agencies (LEAs) to meet the requirements of record keeping as outlined in AHERA. THE LEA Designated Person may complete this packet. AN AHERA accredited inspector or Management Planner does not have to complete this packet.

<u>AT A MINIMUM</u>, completed copies of the following forms should be submitted to the State, the original documents must be kept with your Management Plan.

- 1. Transmittal Sheet/AHERA Submittals (TAHERA 1.0)
- 2. Checklist for Yearly Progress Report (TAHERA 1.1)
- 3. Assurances Form (TAHERA 3.0)
- 4. Dated Annual Written Notification
- 5. Periodic Surveillance Report Form (TAHERA 9.0)
- 6. Annual Progress Report (TAHERA 15.0)

Additional forms may also need to be submitted. Please review the Checklist For Yearly Progress Reports (TAHERA 1.1) in order to determine the need for additional forms. The list below indicates the additional forms that have been included for your use if needed.

- 1. School Building List (TAHERA 5.0)
- 2. School Information/Certification Form (TAHERA 6.1A)
- 3. Abatement Action (TAHERA 10.0)
- 4. Employee Training Form (TAHERA 11.0)
- 5. Operations and Maintenance Activity (TAHERA 12.0)
- 6. Cleaning Record (TAHERA 13.0)
- 7. Fiber Release Episode (TAHERA 14.0)

LEA System N	Chest	TRANSMITTAL SHE	ET/AHERA SUBMITTAL	LEA # 120
Address:	P O Box 32	7		
County:	Henderson	TN 38340	•	· · · · · · · · · · · · · · · · · · ·
LEA Designate	d Person:	Ģene Cajn	Telephone:	901-424-6428
May 24	, 1995			

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN 'X' IN THE APPROPRIATE BOX

ORIGINAL SURMISSION	CORRECTION/ DEFICIENCY SUBMISSION	TYPE OF DOCUMENT	
		MANAGEMENT PLAN	5 . h
X .		YEARLY PROGRESS REPORT	š
		REINSPECTION	ŭ.
		Other (please explain)	

CHECKLIST FOR YEARLY PROGRESS REPORTS

SCHOOL YEAR ENDING June 30, 1995

Page 1 of 2

A Progress Report must be completed and incorporated into your Management Plan yearly to assure compliance with the mandates of AHERA. This checklist and attached forms will assist you in meeting these record keeping requirements.

Attached	Not Applicable	Will be sent by Management Planner	
X			1. Transmittel Sheet/AHERA Subwittels (TAHERA 1.0)
X			2. Checklist for Yearly Progress Reports (TAHERA 1.1)
X			8. Assurances (TAHERA 8.0)
X			4. Periodic Surveillance Report (TAHERA 9.0)
X			5. Annual Progress Report (TAHERA 15.0)
X			6. Notice to the parents, teachers, and employees stating where the Management Plan is located.

ADDITIONAL FORMS THAT MAY BE REQUIRED TO BE FILED WITH THE STATE (Please indicate whether any of these forms are necessary for your LEA).

Attached	Not Applicable	Will be sent by Management Planner	
	X		Revised School Building List (TAHERA 5.0) This form must include all new school buildings or additions.
	X		2. School Information/Certification Form (TAHERA 6.1A) This form must be completed for all buildings and additions completed during the last year. Attach letter(s) from Architect, Engineer, or accredited Inspector if:
		e e e e e e e e e e e e e e e e e e e	s. If an existing building is acquired after 10/12/88, and is intended to be used as a new school or as a part of an existing school, an AHERA inspection Management Plan shall be conducted <u>PRIOE</u> to the use of the building as a school building. PLEASE NOTE THAT THE MANAGEMENT PLAN MUST BE SUBMITTED TO THIS OFFICE PRIOR TO USE OF THE BUILDING AS A SCHOOL FACILITY.

CHECKLIST FOR YEARLY PROGRESS REPORTS

Page 2 of 2

Attached	Not Applicable	Will be sent by Management Planner	8 E
	X	a a	b. If a new building is constructed after 10/12/88, and is intended to be used as a school, an AHERA inspection Management Plan shall be conducted PRIOR to the use of the building as a school building. The inspection and assessment of the building materials may be waived if an Architect, Project Engineer responsible for the construction of the building, or an accredited inspector signs a statement that (1) no ACBM was specified as a building material in any construction document for the building or (2) to the best of his/her knowledge, no ACBM was used as a building material in the building. If such a statement is obtained, the LEA shall submit a copy of the signed statement to EPA Regional Office and shall include the statement in the Management Plan for the school.
	X		8. Abstement Action (TAHERA 10.0) This form must be completed for any removal, enclosure, encapsulation or repair greater than 8 square or linear feed. Please attach a copy of the air monitoring report.
X		· .	4. Employee Training Form (TAHERA 11.0) This form must be completed for any new custodial and maintenance employees. Training must be completed within sixty days (80) days of commencement of employment.
	X		5. Operations and Maintenance Activity (TAHERA 12.0) This form must be completed for any removal, enclosure, encapsulation or repair less than 8 square or linear feet.
	X	Y	6. Cleaning Record (TAHERA 13.0) This form must be completed for any initial or additional cleaning as recommended by your Management Planner. Initial cleaning must be conducted for all schools containing friable asbestos.
	X		7. Fiber Release Episode Form (TAHERA 14.0) This form must be completed for the falling or dislodging of asbestos- containing materials in any quantity.

ĺ		Chester County	D:	* *			•	
	LEA System Name:	-		 	LEANO	120		=
The second second			В		DATE: _	May 24,	1995	÷.

This AHERA Management Plan was developed and has been submitted pursuant to the Asbestos Hazard Emergency Response Act of 1986, Public Law 99-519; and the United States Environmental Protection Agency Rule: Asbestos Containing Material in Schools, 40 CFR Part 763, Subpart E.; and the undersigned does hereby certify that the Local Education Agency (LEA) indicated below has and will ensure the following:

- 1. The activities of any persons who perform inspections, reinspections, and periodic surveillance, develop and update management plans, and develop and implement response actions, including operations and maintenance, are carried out in accordance with Part 768 and other State rules and requirements.
- All custodial and maintenance employees are properly trained as required in Part 763 and all other applicable Federal and State regulations (e.g., the Occupational Safety and Health Administration Asbestos Standard for Construction, the EPA Worker Protection Rule or applicable State regulations).
- All workers and building occupants, or their legal guardians, are informed at least once each school year about
 inspections, response actions, and post-response action activities, including periodic reinspection and surveillance activities, that are planned or in progress.
- All short term workers (e.g., telephone repair workers, utility workers, or exterminators) who may come in contact with asbestos in a school are provided information regarding the locations of asbestos-containing materials (ACM).
- 5. All warning labels are posted in accordance with Section 763.95.
- All management plans are available for inspection and notification of such availability has been provided as specified in the AHERA regulations under Paragraph 763.93(g).
- The undersigned person designated by the LEA pursuant to Paragraph 768.84(g)(1) has received adequate training as stipulated in Paragraph 763.84(g)(2).
- The LEA has and will consider whether any conflict of interest may arise from the interrelationship between the Management Planner and other accredited persons performing AHERA activities.

EA DESIGNATED PERSON'S NAME (please print):	n
EA DESIGNATED PERSON'S SIGNATURE:	2 Caren
Dr. Kathy Coatne (please print): SUPERINTENDENT'S NAME (please print): SUPERINTENDENT'S SIGNATURE:	ey Mays
LEA System Name: Chester County	LEA NO: 120°
*	DATE: May 24, 1995

PERIODIC SURVEILLANCE REPORT

SCHOOL NAME: Jack's Creek Elementary	NAME TO THE PARTY OF THE PARTY
BUILDING NAME: Main Building	SCHOOL YEAR: 94 - 95
(Fill this form out every six (6) mouths for each school building; attack copy to the State. The <u>original</u> of this document must be kept with you	n to your Yearly Progress Report and submit a our Management Plan.)

HAF	DESCRIPTION OF ACBM	area inspected	let six months DATE 12-07-94	2nd six months DATE 05-23-95
1	Floor Tile	ALL	Good	N/C
2	Floor Tile	ALL	Good	N/C
3	Floor Tile	ALL	Good	N/C
4	Floor Tile	ALL	Good	N/C
	Ceiling Tile	ALL	Good	N/C
	10.004		A Commission of the Commission	
		A Company of the Comp		
	1,414		,	

Surveillance Inspector's Name (please print): Gene Cain

Surveillance Inspector's Signature:

(Surveillance Inspector is not required to be AHERA certified.)

AHERA Accreditation Number/Date (if applicable): Georgia Tech - 1839 - 2/7/95

LEA System Name:

Chester County

LEA NO:

DATE: May 24, 1995

AHERA 9.0 (4/93)

annual progress report													
SCHOOL NAME:	Jack's Creek Elementary												1
BUILDING NAME:	Main					+:	-	8	CHO(ol ye	AR: 94	1 - 95	
SUMMARY OF RESPONSE ACTIONS:													
LEGEND A institute Pro Measures B O & M C Repair	eventative	Material Mescription	or Tile	oor Tile	oor Tile	or Tile	ling.Til						
D Encapsulate E Enclose	,		F100.	F10	Flo	F10	Cei						
F Remove G isolate H Other (Expla	ín')	II.A Kumber	-	2	т	Ť							
LEA SELECTED RE (See Legend)	SPONSE ACTI	ON.										1.00	
	A B C		XX	X X	X	X X	X			- Manual Com			
CHECK ONE	E F G												
RESPONSE ACTION	н							<u> </u>	······		4	lawy	
COMPLETED?	YES			l .	Ι			Ţ:.					
CHECK ONE RESPONSE ACTION	CHECK ONE NO		X	Х.	X	x_	x		<u> </u>	l			
IN PROGRESS?	YES	3	X	X	X	X	X	Ţ <u>. </u>	1	1	 		
CHECK ONE MANAGEMENT PLAN SCHEDULE	NO_			1		A			<u> </u>				
COMPARISON CHECK ONE	On Schedu Ahead Sche Behind Sch	edule_	X	X	X.	X	X						
INSPECTOR'S NAME (please print):													
INSPECTOR'S SIGNATURE:								-					
												26 939	
LEA System Name: Chester County						A H		NO: _		1005	 ir		
9			8					•	DAT	E: _M	ay 24,	1995	-

TAHERA 15.0 (4/93)



P.O. Box 327 • Henderson, Tennessee 38340 • Telephone 901 989-5134 KATHY COATNEY MAYS, Superintendent

August 10, 1994

DWAIN SEATON, Chairman Route 2 • Beech Bluff

DANNY SWAFFORD, Vice Chairman Enville

> MABEL DAVIDSON 814 Hearn St. - Henderson

> DWIGHT BINGHAM P.O. Box 251 - Henderson

JIM CHANDLER 155 Second St. - Henderson

BOB MOORE

Tennessee Department of Finance & Administration Capital Projects Management Division Suite 500, Nashville City Center 511 Union Street Nashville, Tennessee 37245-0300 2435 Old Friendship Rd. - Finger

GLENN NAYLOR 3420 Old Finger Rd. - Finger

Dear Sir:

This is to verify that the Chester County School System has duplicated the attached asbestos letters and disseminated to all students, parents, personnel, and Parent-Teacher Organization officers. These were distributed on August 10, 1994.

Sincerely,

Kathy Coatney Mays, Superintendent

Chester County Schools

KCM:cb

Attachments

TO: Principal, Teachers, Lunchroom Employees, Custodians, Maintenance Employees and Parent Organizations

FROM: Dr. Kathy Coatney Mays

SUBJECT: EPA Rule 763.93 (G) (4) concerning non-friable asbestos at the Jacks Creek Elementary School.

EPA Rule 763.93 (G) (4) requires the local education agency to notify in writing of the availability of the management plan.

The management plan is located in the Principal's Office and may be seen at their convenience.

OCCUPANT INFORMATION RECORD

DOCUMENT I	NUMBER:	DATE:	Ø.
RECEI T	PT ACKNOWLEDGING THE PRESENCE OF ASBE	IAT I HAVE BEEN IN STO-CONTAINING BUI IALS IN:	FORMED OF LDING
Bullding Nymbor a	and Name	Dullding Location	
120 0025 Jack	s Creek Elementary School	General Delivery Jacks Creek, TN 38347	7
I	FURTHER ACKNOWLEDG PROVIDED TO ME INC	SE THAT THE INFORMATION OF THE FOLLOWING	
WHICH	DCATIONS OF ASBESTO- I MIGHT HAVE ACCES NCE IN THE BUILDING	S IN THE NORMAL CO	ALS TO URSE OF MY
2) THE HA	AZARDS TO HEALTH PR	ESENTED BY ASBÉSTO	s.
CONTAI	PRIATE BEHAVIOR IN ' INING MATERIALS WHI DTENTIAL HAZARD.	THE PRESENCE OF AS CH WILL PREVENT OR	BESTO- REDUCE
EVENT	CATION PROCEDURES OF THE ASBESTOS-C	LE CHANGE IN THE C	NOTTIGNO
OF AN	PROCEDURES WHICH EMERGENCY WHICH MINING MATERIALS.		
	MY REASON FOR BEIN	G IN THE BUILDING	IS:
		31	
	My Signature in acknowledgment o	f the above.	
18°	Please Print Your Name		
27 - 12	Employer Name, Address and Phone	Humber	

INFORMING BUILDING OCCUPANTS

Asbestos is a potential health hazard.

Material containing asbestos has been found in the building.

The ACM is currently in good condition and should not present a danger unless damaged or disturbed.

Avoid disturbing the Λ CM (e.g., do not hang plants or pictures on the Λ CM, do not puch furniture against the Λ CM, do not remove ceiling tiles).

Report any evidence of disturbance or damage.

Cleaning and maintenance personnel are taking special precautions during their work to properly clean up asbestos debris and to guard against disturbing the ACM.

All ACM is inspected periodically and additional measures will be taken when needed to protect the health of building occupants.

Report any dust or debris from ACM, any change in the condition of the ACM, or any improper action of building personnel to:

Gene Cain, 901/427-1561

The ACM is found in the following locations:

Areas A, B, C, D - Floor tile in the halls, classrooms, library, office, two portable classrooms, two landings from the stage, cafeteria and kitchen.

USE THIS FORM TO DOCUMENT TRAINING OF CUSTODIAL AND MAINTENANCE EMPLOYEES. PROVIDE ONE FORM FOR EVERY SCHOOL.

Asbestos awareness

	iod of Instruction	Hrs.
Instructor (Print Name): $\frac{1}{2}$	Kathy Coatney Mays	Agency:
ATTENDEES:		
NAME (Print)	30	DB TITLE
See Attached List		
790.490		
And the same transfer	THE PARTY NAMED IN COLUMN TWO IS NOT THE PARTY OF THE PAR	4
	TO WINDOWS CO.	
	W W W W W W W W W W W W W W W W W W W	7
		1
	TO THE STREET STREET	
and the second s	A STATE OF THE STA	
(Kin	A THE STATE OF THE	The state of the s
LEA Designated Person cer above described AHERA Comp	rtifies that the pe liance Training Pro	erson indicated attended the
LEA Designated Person:	0	2
Signature:	Daniel Ca	
		Application of the second of t
LEA System Name: Chester Coun	ity	LEA NO.: 120
<u> </u>	92	Date: May 24, 1995

TAHERA11.0(3/91)

Asbestos - Awareness Training

have this date, December 14, 1994 participated in an awareness training session for asbestos awareness.

	NAME	SCHOOL
1.	Tonny & wyw	((//5
2.	Brackstan findance	
3.	P.C. Burrass	what Fruits
4.	M. Davis	CCJHS
5.	Kom E Schundlbrek	CCIHS
6.	Tartier Strang	North
7.	Len Du	Voc
.8.	- Class	
9.	Johnny Huges	Co Co Ha So
10.	William Spencer	CCHS
1	Wilsun Hospith	£as+
12.	Dianne Hysmith	East'
13.	Gail Ross.	J.C. School
14.		
15.		
16.		
17.		
18.		
19.		
20.		
21.		
22.	•	
23.		
24		
25.		

Way 12, 19194 This is to certify that I participated in Rafity training with Michael young on May 12, 1994. Thes. included safety procedures, wearing back braces, right-to-know, blood down pathogens, aslestes dangus, etc. Michael cound proper lifting frocedured also 1. Lathy Contray Mark 3. Johnny Hayes 4) Dail Ross Jacks Creek 5. Lung Johnson 4. Pg C. Durross West Chester 7. Pattiel Strang. north Charles 8. Diane Hydmith East Chaster 9. av ulher Hysnelf Gazit 10. Kwi E Schudlbut CCHS Marion O-Davis CPJH5 12.

O. O. C. Bur

DATE: 8/14/98____

	5 ×		*
Lea system name: _	Chester County Board of Education		LEA #: 120
ADDRESS:	Courthouse		
_	Henderson, TN 38340	¥	u ⁴
	4		
)ESIGNATED PERSON	John H, Shelton	PHONE:	(901) 664-2561

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX.

ORIGINAL AUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF BOCHMENT
v		MANAGEMENT PLAN
		YEARLY PROGRESS REPORT
X	V.	THREE YEAR REINSPECTION
		OTHER (Please Explain)

Eddie Miller
INSPECTOR (Typed name)

SIGNATURE

431531229 / TN ACCREDITATION #/STATE

431531229 / TN

ACCREDITATION #/STATE

Eddie Miller

MANAGEMENT PLANNER

SIGNATURE

LEA NAME: Chester Co					LEA#:		120			
SCHOOL BUILDING NAME: _	Jack's	Creek E	lementa	ıry			Port			
DATE OF IMPLEMENTATION	of manag	EMENT PLA	N : <u>7-09-</u>	89	INSPEC	CTION I	DATE: 8-	03-98		
HA NUMBER THE Through Out				NUMBER	HA NUMBER			ANUMBER		
5 AGRICULTURE (e)	2000 CURRENT	Sq.ft		CURRENT QUANTITY		CURRENT QUANTITY		2000	CURRENT QUANTITY	
	MATERIAL D	ng Tile	MATERIAL	DESCRIPTION	1000000		DESCRIPTION	MATRE	AL DESCRIPTION	
7796 3	LAST		LAST	CURRENT	1000000	LAST YEAR	CURRENT	LASI 3 YEA	Annual III III annual of Superior Superior III	
CHECK ONE TSI SURFACING	3 YEAR	CURRENT	3 YEAR	CUICKENI	Ħ	TERE	CURRENT			
MISCELLANEOUS CHECK ONE ASSUMED ACBM CONFIRMED ACBM	The second secon	X								
NON-ACBM CHECK ONE NON-FRIABLE	X	X								
FRIABLE EXPOSURE CONSIDERATION 1.70 5(\$ WORST)	1] [
PHYSICAL DAMAGE WATER DAMAGE ACTIVITY/VIBRATION	1 2	1 3								
EXPOSURE ACCESSIBILITY LENGTH OF EXPOSURE	3	3] E			1 📙		
(CHECK ONE) 1 HOUR / WEEK 5 HOUR / WEEK			F] [
10 HOUR / WEEK HOUR / WEEK HOUR / WEEK AXPOSURE POPULATION	X	X			$\exists E$					
(CHECK ALL APPLICABLE) MAINTENANCE CUSTODIAL	X	X			3 E					
FACULTY / STAFF PUBLIC ASSESSMENT (MARK FROM 1 TO 7)	X	X			 					
• • RESPONSE ACTIONS (MARK FROM A TO H)	5	5) [
	A-B	A-B	JL]::::[J***L		
1. Damaged/significantly d 2. Damaged friable surfact 3. Significantly damaged fr	amaged TSI ng ACBM iable surfacing			A. Institute B. O & M P C. Repair D. Encapsul	preventati rogram		CTIONS LE ires	GEND E. Enclosu F. Remove G. Isolate H. Other		
4. Damaged/significantly d 5. ACBM with potential fo 6. ACBM with potential fo 7. Any remaining friable A	or damage or significant da	ımage			P M was tosted			era 63, tabe	RA 69 and TAHERA 8	
Eddie Miller INSPECTOR (Typed name		SIGNATU	RE (<u> </u>			43153122 CCREDIT		/STATE	
Eddie Miller MANAGEMENT PLANN	ER	SIGNATU	MA RE		_		43153122 ACCREDIT		*/STATE	
TEANT.							1			

LEA NAME:

CHESTER COUNTY SCHOOLS

LEA#:

791

SCHOOL NAME: JACK'S CREEK ELEMENTARY

SCHOOL#:

MAIN

BUILDING NAME:

JACK'S CREEK ELEMENTARY

INSTRUCTIONS:

AHERA regulations require a Periodic Surveillance be conducted every six (6) months. Each School building containing ACBM must be inspected. Put the date in the appropriate column, fill in the HA#, Description of ACBM, and Area Inspected. If the ACBM has been removed, put the date removed in the appropriate column. Keep the original with your Management

1ST SIX MONTHS 2ND SIX MONTHS DATE SPRING 4-03-98 DATE FALL: 10-6-97 **ACBM ACBM** DATE REMOVED AREA INSPECTED CONDITION* **DESCRIPTION OF ACBM** CONDITION* HA# N/C GOOD ALL FLOOR TILE 1 N/C GOOD ALL FLOOR TILE 2 GOOD N/C ALL FLOOR TILE 3 N/C GOOD ALL FLOOR TILE 4 N/C GOOD ALL **CEILING TILE**

*IF NO CHANGE IN CONDITION WRITE N/C

SURVEILLANCE INSPECTOR'S NAME (please print);

SURVEILLANCE INSPECTOR'S SIGNATURE:

(Surveillance Inspector is not required to be AHERA certified

AHERA Accreditation Number/Date (if applicable): ENVIRONMENTAL TECHNOLOGIES #431531229 - 5/20/98-99

TAHERA 9.0 (12/93)

SCHOOL NAME:	Jack's Creek Eler	mentary					- (6) -						1
"UILDING NAME;	Main		-	-			*: -	8	CHOC	DL ÝE	AR: 9	7 - 98	
SUMMARY OF RESPO	NSE ACTIONS	L					Φ						
LEGEND A Institute Promessures B O & M C Repair D Encapsulate E Enclose	iventative	Material Mescription	Floor Tile	Floor Tile	Floor Tile	Floor Tile	Ceiling.Til						
F Remove G Isolate H Other (Explain	(n)	Number Number		2	3	4							
LEA SELECTED RES		200	X X	X	X	X X	X X						
RESPONSE ACTION COMPLETED?	YES			ļ	ļ			•				; 	
CHECK ONE RESPONSE ACTION IN PROGRESS?	NO YES		X	I x		· x	X) 		1	
CHECK ONE MANAGEMENT PLAN	КO			İ					l	<u> </u>		1	1
SCHEDULE COMPARISON CHECK ONE	On Schedul Ahead Sche Behind Sch	dule	Х	l x	l x	X	X					<u> </u> -	
INSPECTOR'S NAME (please print): Eddie Miller													
Inspector's sign	INSPECTOR'S SIGNATURE:												
LEA System Name:	Chester County	33.17	· ·	mile -				- W	T.EA.	NO: _	20		3 9 0
LIKA System Name:			•:							<u>8-3</u>			_

TAHERA 15.0 (4/93)

ANNUAL PROGRESS REPORT

1999 Yearly Progress Report

LEA NAME:	CHESTER COUNTY SCHOOLS	LEA #: 12)	
SCHOOL NAME:	JACK'S CREEK ELEMENTARY	SCHOOL#:	MAIN	
BUILDING NAME	: JACK'S CREEK ELEMENTARY			
INSTRUCTIONS:	AHERA regulations require a Periodic Surveillar School building containing ACBM must be inspe fill in the HA#, Description of ACBM, and Area In put the date removed in the appropriate column.	cted. Put the date in the spected. If the ACBM	he appropriate column, has been removed	

10 C			1ST SIX MONTHS	2ND SIX MONTHS	
W. O. M.D.			DATE FALL: 11-16-98	DATE SPRING 4-23-99	
HA#	DESCRIPTION OF ACB	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	FLOOR TILE	ALL	GOOD	N/C	
2	FLOOR TILE	ALL	GOOD	N/C	
3	FLOOR TILE	ALL	GOOD	N/C	
4	FLOOR TILE	ALL	GOOD	N/C	10
	CEILING TILE	ALL	GOOD	N/C	
	-				
	7				

	*IF NO CHANGE IN CONDITION WRITE N/C
SURVEILLANCE INSPECTOR'S NAME (please print):	CHESTER ERVIN
SURVEILLANCE INSPECTOR'S SIGNATURE:	(he fu T
(Surveillance Inspector is not required to be AHERA cer	tified
AHERA Accreditation Number/Date (if applicable):	SEE TAHERA FORM 2.0 ATTACHMENTS

2000 Yearly Progress Report

LEA NAME:	CHESTER COUNTY SCHOOLS	LEA #: 120				
SCHOOL NAME:	JACK'S CREEK ELEMENTARY	SCHOOL #:	MAIN			
BUILDING NAME	: JACK'S CREEK ELEMENTARY	· ·				
INSTRUCTIONS	AHERA regulations require a Periodic Surve School building containing ACBM must be in fill in the HA#, Description of ACBM, and Are put the date removed in the appropriate colu	nspected. Put the date in the last in the	he appropriate column, has been removed,			

			ST SIX MONTHS ATE FALL: 9-22-99	2ND SIX MONTHS DATE SPRING 3-31-00	
HA#	DESCRIPTION OF ACB	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	FLOOR TILE	ALL	GOOD	N/C	
2	FLOOR TILE	ALL	GOOD	N/C	
3	FLOOR TILE	ALL	GOOD	N/C	
4	FLOOR TILE	ALL	GOOD	N/C	
	CEILING TILE	ALL	GOOD	N/C	

				RI	
					A.
	,				

E N/C

DATE: September 25, 2003

lea system name: _	Chester County Board of Ed	lucation	
ADDRESS:			8
19		₩)	
<u></u>	Henderson, TN 38340		· · · · · · · · · · · · · · · · · · ·
	3		
DESIGNATED PERSON:	John Pipkin	PHONE:	(901) 664-2561
18	EN .	g × = 8:	4
740	*	10 S	a a

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX.

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF BOCUMENT
		MANAGEMENT PLAN
X	5	YEARLY PROGRESS REPORT - 1999
		THREE YEAR REINSPECTION
		OTHER (Please Explain)

LEA NAME:	CHESTER COUNTY SCHOOLS	LEA #: 120		
SCHOOL NAME	JACK'S CREEK ELEMENTARY	SCHOOL#:	MAIN	
BUILDING NAME	E: JACK'S CREEK ELEMENTARY	-		
INSTRUCTIONS	: AHERA regulations require a Periodic Surve	eillance be conducted every	six (6) months. Each	

AHERA regulations require a Periodic Surveillance be conducted every six (6) months. Each School building containing ACBM must be inspected. Put the date in the appropriate column, fill in the HA#, Description of ACBM, and Area Inspected. If the ACBM has been removed, put the date removed in the appropriate column. Keep the original with your Management

			IST SIX MONTHS	2ND SIX MONTHS	
			DATE FALL: 11-16-98	DATE SPRING 4-23-99	
HA#	DESCRIPTION OF ACB	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	FLOOR TILE	ALL	GOOD	N/C	
2	FLOOR TILE	ALL	GOOD	N/C	
3	FLOOR TILE	ALL	GOOD	N/C	283
4	FLOOR TILE	ALL	GOOD	N/C	
	CEILING TILE	ALL	GOOD	N/C	
		14			
1					
3.		14			
			.,		
	=				160
	L.				

	*IF NO CHANGE IN CONDITION WRITE N/C
SURVEILLANCE INSPECTOR'S NAME (please print):	CHESTER ERVIN
SURVEILLANCE INSPECTOR'S SIGNATURE:	Chops C
(Surveillance Inspector is not required to be AHERA cert	ified
AHERA Accreditation Number/Date (if applicable):	SEE TAHERA FORM 2.0 ATTACHMENTS
TAHERA 9.0 (12/93)	

DATE: September 25, 2003

LEA SYSTEM NAME: _	Chester Coun	ty Board	of Educa	ition		LEA#	120	
LEASYSTEM NAME: _	Onescer star					74		
ADDRESS:								-
-					e			- 8#
	Henderson,	TN 3	8340		er en		x*	==
		ī.		Š.	# # # # # # # # # # # # # # # # # # #			
Name of the second	John Pip	kin	.5 4		PHONE:	(901) 664	-2561	
DESIGNATED PERSON	+	8 p		(4) 2 8	*			
	Ť.		34 37 34	w				10
		s)	n na			TO STORY OF THE ST	Ü.	-
PIE	ASE INDICA	TE TYPE	OF DOC	UMENT	(S) BEING S	RWITTED		

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX.

ORIGINAL EURMISSION	CORRECTION DESIGNATION SUBMISSION	TYPEOF BOCUMENT
		MANAGEMENT PLAN
X		YEARLY PROGRESS REPORT - 2000
		THREE YEAR REINSPECTION
		OTHER (Please Explain)

LEA NAME:	CHESTER COUNTY SCHOOLS	LEA #:120
SCHOOL NAME	: JACK'S CREEK ELEMENTARY	SCHOOL #: MAIN
BUILDING NAM	E: JACK'S CREEK ELEMENTARY	=
INSTRUCTIONS	School building containing ACBM must be fill in the HA# Description of ACBM, and A	veillance be conducted every six (6) months. Each inspected. Put the date in the appropriate column, trea Inspected. If the ACBM has been removed, blumn. Keep the original with your Management

			ST SIX MONTHS ATE FALL: 9-22-99	2ND SIX MONTHS DATE SPRING 3-31-00	
HA#	DESCRIPTION OF ACB	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	FLOOR TILE	ALL	GOOD	N/C	
2	FLOOR TILE	ALL	GOOD	N/C	
3	FLOOR TILE	a ALL	GOOD	N/C	
4	FLOOR TILE	ALL	GOOD	N/C	
	CEILING TILE	ALL	GOOD	N/C	
	-				74
	9				12
	2		><		
		2			14
	1 ×				
-	e d				2
	7				
	,				

	*IF NO CHANGE IN CONDITION WRITE N/C
SURVEILLANCE INSPECTOR'S NAME (please print):	CHESTER ERVIN
SURVEILLANCE INSPECTOR'S SIGNATURE:	Chille
(Surveillance Inspector is not required to be AHERA cer	tified
AHERA Accreditation Number/Date (if applicable):	SEE TAHERA FORM 2.0 ATTACHMENTS
TAHERA 9.0 (12/93)	

DATE: September 25, 2003

LEA SYSTEM NAME: _	Chester County Board of Education	1		_
ADDRESS:			920	
,		#/	1	j.
_	Henderson, TN 38340			
	, J	. e		
DESIGNATED PERSON:	John Pipkin	PHONE:	(901) 664-2561	
		4	a	
	N.		A.	

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX.

ORIGINAL EURAHISTION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
		YEARLY PROGRESS REPORT
X		THREE YEAR REINSPECTION - 2001
×		OTHER (Please Explain)

2002 Yearly Progress Report

LEA NAME:	CHESTER COUNTY SCHOOLS	LEA #: 120	
SCHOOL NAME:	JACK'S CREEK ELEMENTARY	SCHOOL#:	MAIN
BUILDING NAME	JACK'S CREEK ELEMENTARY	e	
INSTRUCTIONS:	AHERA regulations require a Periodic Surve School building containing ACBM must be in fill in the HA#, Description of ACBM, and Are put the date removed in the appropriate colu	spected. Put the date in the last in the Inspected. If the ACBM	he appropriate column, I has been removed,

The present			1ST SIX MONTHS	2ND SIX MONTHS	
			DATE FALL: 10-15-01	DATE SPRING 5-18-02	
HA#	DESCRIPTION OF ACB	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	FLOOR TILE	ALL	GOOD	N/C	
2	FLOOR TILE	ALL	GOOD	N/C	
3	FLOOR TILE	ALL	GOOD	N/C	
4	FLOOR TILE	ALL	GOOD	N/C	
	CEILING TILE	ALL	GOOD	N/C	
		-			
			11		

			*IF	NO CHANGE IN	CONDITION WRITE	N/C
SURVEIL	LANCE INSPECTOR'S NAME (p	lease print):	CHESTER	ERVIN		
SURVEILLANCE INSPECTOR'S SIGNATURE:				luto C	>	
(Surveilla	nce Inspector is not required to be	e AHERA certifie	ed			
AHERA A	ccreditation Number/Date (if app	licable):	SEE T	AHERA FORM 2.	0 ATTACHMENTS	
TAHERA	9.0 (12/93)					

DATE: September 25, 2003

lea system name: _	Chester County Board of Educ	ation	LEA#: 120
ADDRESS:		8	*
	Henderson, TN 38340	er S	
-	1	8 = 8 8	late a
DESIGNATED PERSON:	John Pipkin	PHONE:	(901) 664-2561

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX.

ORIGINAL SUBMISSION	CORRECTION DEFICIENCS	EVPLOF ROCHMENT
		MANAGEMENT PLAN
X		YEARLY PROGRESS REPORT - 2002
		THREE YEAR REINSPECTION
	34	OTHER (Please Explain)

LEA NAME:	CHESTER COUNTY SCHOOLS	LEA #:120		
SCHOOL NAME:	JACK'S CREEK ELEMENTARY	SCHOOL #:	MAIN	
BUILDING NAME:	JACK'S CREEK ELEMENTARY		6:	
INSTRUCTIONS:	AHERA regulations require a Periodic Survei School building containing ACBM must be ins fill in the HA#, Description of ACBM, and Are put the date removed in the appropriate colur	spected. Put the date in t a inspected. If the ACBM	he appropriate column, I has been removed,	

		1	ST SIX MONTHS	2ND SIX MONTHS	
		D D	ATE FALL: 10-15-01	DATE SPRING 5-18-02	
HA#	DESCRIPTION OF ACB	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	FLOOR TILE	ALL	GOOD	N/C	
2	FLOOR TILE	ALL	GOOD	N/C	
3	FLOOR TILE	ALL	GOOD	·N/C	
4	FLOOR TILE	ALL	GOOD	N/C	
	CEILING TILE	ALL	GOOD	N/C	
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				· · · · · · · · · · · · · · · · · · ·	
	, , , , , , , , , , , , , , , , , , ,		-		
	-				
	_				
			35		

	38	
	*IF NO CHANGE IN CONDI	TION WRITE N/C
SURVEILLANCE INSPECTOR'S NAME (please print):	CHESTER ERVIN	
SURVEILLANCE INSPECTOR'S SIGNATURE:	(Make T	
(Surveillance Inspector is not required to be AHERA certif	fied	
AHERA Accreditation Number/Date (if applicable):	SEE TAHERA FORM 2.0 ATTA	CHMENTS
TAHERA 9.0 (12/93)		17

LEA NAME: CHESTER COUNTY SCHOOLS LEA #: 120 SCHOOL BLDG. NAME: JACK'S CREEK ELEMENTARY BUILDING # MAIN BUILDING DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/1989 INSPECTION DATE: 8/13/2003 HA 01 HA 02 HA 03 HA 04 CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY 6401 42 959 1512				
DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/1989 INSPECTION DATE: 8/13/2003 HA 01 HA 02 HA 03 HA 04 CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY				
HA 01 HA 02 HA 03 HA 04 CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY				
HA 01 HA 02 HA 03 HA 04 CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY				
CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY				
(株) 1/9// Me - 新社会ない(法) - 1				
24 15 AGRICULTURE 1 1: 4 6401 124 42 125 959 134 1512				
MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION				
FLOOR TILE FLOOR TILE FLOOR TILE FLOOR TILE				
LAST 3 LAST 3 LAST 3 LAST 3				
T, S or M YEAR CURRENT YEAR CURRENT YEAR CURRENT YEAR CURRENT				
MATERIAL TYPE M M M M M M M M M M M				
Check One				
ASSUMED ACBM X X X X X X X X X				
CONFIRMED ACBM				
NON-ACBM				
Check One				
NON-FRIABLE X X X X X X X X X X				
FRIABLE				
Exposure Consideration				
DETERIORATION				
WATER DAMAGE 1 1 1 1 1 1 1 1 1 1				
ACTIVITY / VIBR. 3 3 3 3 3 3 3 3				
EXPOSURE 5 5 5 5 5 5 5				
ACCESSIBILITY 5 5 5 5 5 5 5				
Length of Exposure 1 1 HOUR / WEEK				
5 HOUR / WEEK				
10 HOUR / WEEK				
20 HOUR / WEEK				
40 HOUR / WEEK X X X X X X X X X X X				
Exposure Population				
MAINTENANCE X X X X X X X X X				
CUSTODIAL X X X X X X X X X				
FACULTY / STAFF X X X X X X X X X X				
PUBLIC X X X X X X X X X				
Assessment 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5				
**Response Actions B B B B B B B B B B B B B B B B B B B				
Assessment Legend Response Actions Legend				
1. Damaged/ significantly damaged TSI A. Institute Preventative Measures E. Enclosure				
2. Damaged friable surfacing ACBM B. O and M Program F. Remove				
3. Significantly damaged friable surfacing material C. Repair G. Isolate				
4. Damaged/significantly damaged friable misc. ACBM D. Encapsulate H. Other				
5. ACBM with potential for damage Notes				
6. ACBM with potential for significant damage 11 previously assumed ACBM was tested, attach TAHERA6.2, TAHERA6.3, TAHERA 6.9 and TA				
7. Any remaining friable ACBM or suspect ACM "If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5				
CHESTER ERVIN 1 1 1 MAP				
(My.)				
INSPECTOR (Typed Name) SIGNATURE ACCREDITATION # /STATE				
EDDIE MILLER 431531229 / TN				
MANAGEMENT PLANNER SIGNATURE ACCREDITATION #/STATE				

TAHERA 16.0 (12/93)

THREE YEAR REINSPECTION LEA#: 120 CHESTER COUNTY SCHOOLS LEA NAME: **PORTABLES** JACK'S CREEK ELEMENTARY **BUILDING**# SCHOOL BLDG. NAME: INSPECTION DATE: 8/13/2003 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 THROUGHOUT **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** 15,000 MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2 X 4 CEILING TILE CARL THE RESIDENCE OF THE PARTY LAST 3 LAST 3 LAST 3 LAST 3 YEAR CURRENT YEAR CURRENT YEAR CURRENT T, S or M YEAR CURRENT MATERIAL TYPE M Check One X **ASSUMED ACBM** Х CONFIRMED ACBM **NON-ACBM** Check One **NON-FRIABLE** FRIABLE Exposure Consideration DETERIORATION PHYS. DAMAGE 1 WATER DAMAGE 1 1 ACTIVITY / VIBR. 3 3 3 3 **EXPOSURE** 5 5 **ACCESSIBILITY** Length of Exposure 1 HOUR / WEEK 5 HOUR / WEEK 10 HOUR / WEEK 20 HOUR / WEEK 40 HOUR / WEEK Exposure Population X X MAINTENANCE Χ Χ CUSTODIAL Χ Х FACULTY / STAFF **PUBLIC 生命有效的** 产型的现在分词 经 Assessment ** Response Actions A-B 750,000,000 Response Actions Legend Assessment Legend A. Institute Preventative Measures E. Enclosure 1. Damaged/ significantly damaged TSI B. O and M Program F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material H. Other 4. Damaged/significantly damaged friable misc. ACBM D. Encapsulate 5. ACBM with potential for damage Notes 6. ACBM with potential for significant damage "If previously assumed ACBM was tested, attach TAHERA6.2, TAHERA6.3, TAHERA 6.9 and TAHERA 8.0 "If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 7. Any remaining friable ACBM or suspect ACM CHESTER ERVIN SIGNATURE ACCREDITATION # /STATE **INSPECTOR** (Typed Name) **EDDIE MILLER** AR 431531229

ACCREDITATION # /STATE

TAHERA 16.0 (12/93)

MANAGEMENT PLANNER

DATE: September 25, 2003

TEL SUSTEM NAME:	Chester County Board of Education	n	LEA#: 120
	0 «		¥
ADDRESS:			
,	8	201	, "
_	Henderson, TN 38340		
	1	: #	*
DESIGNATED PERSON:	John Pipkin	PHONE:	(901) 664-2561

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX.

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY	TYPE OF DOCUMENT
		MANAGEMENT PLAN
X		YEARLY PROGRESS REPORT - 2003
	* *	THREE YEAR REINSPECTION
		OTHER (Please Explain)

LEA NAME:	ME: CHESTER COUNTY SCHOOLS L NAME: JACK'S CREEK ELEMENTARY	LEA #: 12	20
SCHOOL NAME:	JACK'S CREEK ELEMENTARY	SCHOOL#:	MAIN
BUILDING NAME	: JACK'S CREEK ELEMENTARY		
INSTRUCTIONS:	AHERA regulations require a Periodic Surve School building containing ACBM must be in fill in the HA#, Description of ACBM, and Are put the date removed in the appropriate colu	ispected. Put the date in t ea Inspected. If the ACBM	he appropriate column, I has been removed,

			1ST SIX MONTHS		2ND SIX MONTHS	
			DATE FALL:	9-6-02	DATE SPRING 4-10-03	
HA#	DESCRIPTION OF ACB	AREA INSPECTED	ACI CONDI	BM TION*	ACBM CONDITION*	DATE REMOVE
1	FLOOR TILE	ALL	G	DOD	N/C	
2	FLOOR TILE	ALL	GOOD		N/C	
3	FLOOR TILE	ALL	G	OOD	N/C	
4	FLOOR TILE	ALL	G	OOD	N/C	
	CEILING TILE	ALL	G	OOD	N/C	

*IF NO CHANGE IN CONDITION WRITE N/C

	11 110 010 1110 111 11 11 11 11 11 11 11
SURVEILLANCE INSPECTOR'S NAME (please print):	CHESTER ERVIN
SURVEILLANCE INSPECTOR'S SIGNATURE:	Clerk E
(Surveillance Inspector is not required to be AHERA cer	tified
AHERA Accreditation Number/Date (if applicable):	SEE TAHERA FORM 2.0 ATTACHMENTS
TAHERA 9.0 (12/93)	

2003 Yearly Progress Report

> Ashley -Resolutions Anc. (asbestos Inspection)

May 30?

615-865-8813

615-868-4140 FAX

LEA NAME:	CHESTER COUNTY SCHOOLS	LEA #:120			
SCHOOL NAME:	JACK'S CREEK ELEMENTARY	SCHOOL#:	MAIN		
BUILDING NAME:	JACK'S CREEK ELEMENTARY				
INSTRUCTIONS:	AHERA regulations require a Periodic Surveil School building containing ACBM must be instituted in the HA#, Description of ACBM, and Are out the date removed in the appropriate colur	spected. Put the date in to a Inspected. If the ACBM	he appropriate column, has been removed,		

			ST SIX MONTHS	2ND SIX MONTHS		
			ATE FALL: 9-6-02	DATE SPRING 4-10-03		
HA #	DESCRIPTION OF ACB	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED	
1	FLOOR TILE	ALL	GOOD	N/C		
2	FLOOR TILE	ALL	GOOD	N/C		
3	FLOOR TILE	ALL	GOOD	N/C		
4	FLOOR TILE	ALL	GOOD	N/C	-	
	CEILING TILE	ALL	GOOD	N/C		
	· ·				c	
				1		

*IF NO CHANGE IN CONDITION WRITE N/C

SURVEILLANCE INSPECTOR'S NAME (please print): SURVEILLANCE INSPECTOR'S SIGNATURE:	CHESTER ERVIN
(Surveillance Inspector is not required to be AHERA cert	ified
AHERA Accreditation Number/Date (if applicable):	SEE TAHERA FORM 2.0 ATTACHMENTS
TAHERA 9.0 (12/93)	

DATE: July 2007

LEA SYSTEM NAME: Chester County Board of Education	n LEA#: 120
ADDRESS: P.O. Box 327	
Henderson, TN 38340	
DESIGNATED PERSON: John Pipkin	PHONE: 731-989-5134
if	

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT		
		MANAGEMENT PLAN		
		ASBESTOS FREE MANAGEMENT PLAN		
8		YEARLY PROGRESS REPORT		
X		THREE YEAR REINSPECTION		
		OTHER (Please Explain)		

School Building Name: Jacks Creek Elementary Building #: Main	
DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: INSPECTION DATE: 6/6/07	
HA NUMBER	
1	
CURRENT QUANTITY Floor Tile	
MATERIAL DESCRIPTION	177/
CHECK ONE CHECK ONE TSI CURRENT CURR	шт
CHECK ONE YEAR CURRENT YEAR TO NEW TO	TION
SURFACING MISCELLANEOUS CHECK ONE ASSUMED ACBM CONFIRMED ACBM NON-ACBM CHECK ONE NON-FRIABLE FRIABLE EXPOSURE CONSIDERATION 1	ENT
MISCELLANEOUS	
CHECK ONE	
ASSUMED ACBM CONFIRMED ACBM X X X X X X X X X X X X X X X X X X X	
X	
CONFIRMED ACBIV X	
CHECK ONE NON-FRIABLE NON-FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION PHYSICAL DAMAGE WATER DAMAGE ACTIVITY/VIBRATION EXPOSURE ACCESSIBILITY LENGTH OF EXPOSURE (CHECK ONE) X	
NON-FRIABLE	
NON-FRIABLE	
EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1	
1 TO 5 (5 WORST) DETERIORATION PHYSICAL DAMAGE WATER DAMAGE WATER DAMAGE ACTIVITY/VIBRATION EXPOSURE ACCESSIBILITY LENGTH OF EXPOSURE (CHECK ONE) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
DETÉRIORATION PHYSICAL DAMAGE WATER DAMAGE WATER DAMAGE ACTIVITY/VIBRATION EXPOSURE ACCESSIBILITY LENGTH OF EXPOSURE (CHECK ONE) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
DETERIORATION	
PHYSICAL DAMAGE WATER DAMAGE ACTIVITY/VIBRATION EXPOSURE ACCESSIBILITY LENGTH OF EXPOSURE (CHECK ONE) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
VATER DAMAGE	
ACTIVITY/VIBRATION	
ACCESSIBILITY ENGTH OF EXPOSURE (CHECK ONE)	
ACCESSIBILITY 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(CHECK ONE)	
1 HOURWEEK	
5 HOUR/WEEK	
10 HOURWEEK	
20 HOURWEEK	
40 HOUR/WEEK X X X X X X X X X X X X X X X X X X	•
EXPOSURE POPULATION	is.
(CHECK ALL APPLICABLE) MAINTENANCE X X X X X X X X X X X X X X X X X X X	$\overline{}$
MAINTENANCE A A A A Y Y Y Y Y	
CUSTODIAL A A A A A A A A A A A A A A A A A A	
FACULTY/STAFF X A A A A A A A A A A A A A A A A A	
PUBLIC	
ASSESSMENT (ASSESSMENT)	
(MARK FROM 1 TO 7) 5 5 5 5 5 5	5
5 5 5 5	
**RESPONSE ACTIONS	
(MARK FROM A TO H) B B B B B B	3
ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND	
A. Institute preventative measures E. Enclosure	
1. Damaged/significantly damaged TSI B. O & M Program F. Remove	
Damaged friable surfacing ACBM C. Repair G. Isolate G. Other	
Significantly damaged friable surfacing material D. Encapsulate H. Other	
Damaged/significantly damaged friable misc. ACBM	
NOTES	
6. ACBM with potential for significant damage "If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA	ERA 6.9
TAHERA 8.0	
7. Any remaining friable ACBM or suspect ACBM ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA	RA 6.5
Jim Brooks NSPECTOR (Typed Name) ACCREDITATION #/STATE	
Jim Brooks 7ME02050701AI00007/TN	
NSPECTOR (Typed Name) SIGNATURE ACCREDITATION #/STATE	
TAMEONAGOZOA AMPROMETNI	
Ashlie Rawlings 7ME02160701AMPR004/TN	
ASTITUTE ACCREDITATION #/STATE	

		THE	REE YE	AR REINSF	PECTIO	N			
LEA NAME: Chester							t: <u>12</u>		
School Building Name	Jacks C	reek Elemen				Buildi	-	Main	
DATE OF IMPLEMEN	TATION OF	MANAGEM	ENT PLAN	٧:			CTION	N DATE:	6/6/07
PLUE CO.		JMBER	HA	NUMBER	HA	NUMBER		HAN	IUMBER
AGRICULTURE	CURREN	IT QUANTITY	CURRE	NT QUANTITY	CURRE	NT QUANT	TITY	CURREN	T QUANTITY
MMERC		DESCRIPTION Illing Tile	MATERIAI	L DESCRIPTION	MATERIAL	_ DESCRI	PTION	MATERIAL	DESCRIPTION
CHECK ONE	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURR	ENT	LAST 3 YEAR	CURRENT
TSI SURFACING									
MISCELLANEOUS CHECK ONE	Х	X							
ASSUMED ACBM CONFIRMED ACBM	Х	Х							
NON-ACBM CHECK ONE									
NON-FRIABLE		V							
FRIABLE EXPOSURE CONSIDERATIO	N X	Х							
I TO 5 (5 WORST) DETERIORATION	1	1							
PHYSICAL DAMAGE	1	1							
WATER DAMAGE	1	1							
ACTIVITY/VIBRATION	1	1							
EXPOSURE	1	11							
ACCESSIBILITY LENGTH OF EXPOSURE	11	1							L
(CHECK ONE)		1 V							
1 HOUR/WEEK	Х	X							
5 HOURWEEK			-						
10 HOURWEEK			-		1				
20 HOUR/WEEK									
40 HOUR/WEEK EXPOSURE POPULATION									
CHECK ALL APPLICABLE)	X	Х							
MAINTENANCE CUSTODIAL	X	X							
FACULTY/STAFF	^	+ · · ·							
PUBLIC									
ASSESSMENT (MARK FROM 1 TO 7)						4			
	7	7							
**RESPONSE ACTIONS (MARK FROM A TO H)									
(mark rivom a rom)	В	В							
4000000	ENTLEGEN	D			RESPONS	SE ACTIC	NS LF	GEND	
ASSESSM	ENT LEGEN		ΙΔ	. Institute prever	A SOURCE AND STORY OF			closure	
Damaged/significantly	damaged TS			O & M Progran			F. Re	move	
Damaged friable surface	cing ACBM		c	. Repair			G. Isc		
3 Significantly damaged	friable surfac	ing material	D	. Encapsulate			H. Otl	ner	
 Damaged/significantly 	damaged fria	ble misc. ACBI	M ,						
5. ACBM with potential fo	r damage					NOT	ES	A CO TAILED	62 TALIEDA CO
 ACBM with potential fo Any remaining friable A 	r significant o	lamage bect ACBM	20	f previously assumed and TAHERA 8.0 If "current" is differ					
		c2		tooks					
Jim Brooks		Tue			_ 7			100007/TN	
NSPECTOR (Typed Name	e)		SIGNATUR	E		ACC	YEDII	ATION #/ST	AIE
		() NO. 0.	Mark		7	ME0216	307014	MPR004/T	N .
Ashlie Rawlings		Sylven	SIGNATIUR	F				ATION #/ST	
MANAGEMENT PLANNER			SIGNATION			, .00			



Certificate # 7ME02050701AI00007

This is to certify that

Jim Brooks

completed the requirements for asbestos accreditation under Section 206 of TSCA Title II. 15 U.S.C. 2646 has on 02/07/2007, in Nashville, TN

AHERA Asbestos Inspector Training

on 02/05/2007 - 02/07/2007 and passed the associated examination on 02/07/2007 as approved by the U.S.E.PA. under 40 C.F.R. 763 (AHERA) with a score of 70% or better

CM = 3.00 Pts.

Accreditation Expires: 2/7/08

Thomas Bradford Mayhew

META - P.O. Box 786 - Lawrence KS 66044 . (

800-444-6382



I Ashie Ravings

This is to certify that

completed the requirements for asbestos accreditation under Section 206 of TSCA Title II, 15 U.S.C. 2646 has on 02/16/2007, in Nashville, TN

AHERA Asbestos Management Planner Refresher Course

on 02/16/2007 - 02/16/2007 and passed the associated examination on 02/16/2007as approved by the U.S.E.P.A. under 40 C.F.R. 763 (AHERA) with a score of 70% or better

CM = 0.50 Pts.

MAYHEW

KANSAS

Accreditation Expires: 2/16/08

SALL TRAINE

President
Thomas Bradford Maynew

META - P.O. Box 786 - Lawrence KS 66044

800-444-6382



Certifies That

TERRY MOODY

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

MIKE TIGNOR

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

DANA MEEKS

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

KIM ROBBINS

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009



Expiration Date: July 28, 2010





Certifies That

DARLENE HESTER

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.



Expiration Date: July 28, 2010

Training Date: July 28, 2009





Certifies That

LAURA GAUGER

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009



Expiration Date: July 28, 2010





Certifies That

BRENDA PICKETT

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

DEVEN HEARN

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

ANGIE PARRISH

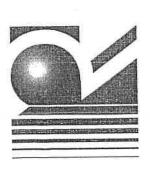
Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

TODD DAVIS

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009







Certifies That

DEMETRIUS LOCKETT

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009



Expiration Date: July 28, 2010

King Training Manage



Certifies That

MELISSA MURLEY

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

TERESA CONNER

Has successfully completed the course entitled

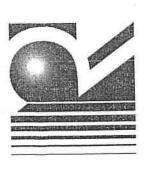
CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009



Expiration Date: July 28, 2010

The state of the s



Certifies That

YVONNE CROSS

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009



Expiration Date: July 28, 2010



Certifies That

WILLE TROHER

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009







Certifies That

JANE SMITH

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

TERESA WILLIS

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

KEN WEST

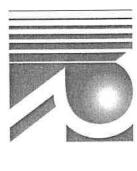
Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING Henderson, TN 38340 Conducted At: 930 East Main St.

Training Date: July 28, 2009

Expiration Date: July 28, 2010





Certifies That

Number: OSHAC4AA100179

Identification

PERRY FRYE

Has successfully completed the course entitled

Conducted At: 930 East Main St.

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING

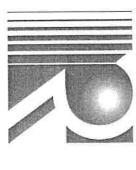
Henderson, TN 38340

Training Date: January 20, 2010

Ron Francis - Training Manager

Expiration Date: January 20, 2011

Stephanie Petty - Instructor



Certifies That

Identification

Number: OSHAC4AA100178

JAMES CARSON

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING

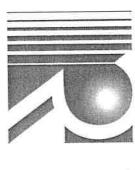
Conducted At: 930 East Main St.
Henderson, TN 38340

Training Date: January 20, 2010

Ron Francis – Training Manager

Expiration Date: January 20, 2011

Stephanie Petty - Instructor



Certifies That

Identification

Number: OSHAC4AA100177

CLARENCE PUSSER

Has successfully completed the course entitled

CLASS IV ASBESTOS 2 HOUR AWARENESS TRAINING

Conducted At: 930 East Main St.
Henderson, TN 38340

Training Date: January 20, 2010

R P

Ron Francis - Training Manager

Expirati

Expiration Date: January 20, 2011

Stephanie Petty - Instructor

Chester County School System

Vennie Reeves

has completed

Asbestos Awareness (K-12 Full 2 Hour)

a training program requiring 2 hours

Monday, November 11, 2013

Tráining Coordinator's Signature

Employees Initials:

westk@tennk12.net 61029q68-2p9r





Chester County School System

Carissa Miller

has completed

Asbestos Awareness (K-12 Full 2 Hour)

a training program requiring 2 hours

on

Monday, November 11, 2013

Tráining Coordinator's Signature

Employees Initials:

westk@tennk12.net 61029q68-2p9r





Chester County School System

Marilyn Amos

has completed

Asbestos Awareness (K-12 Full 2 Hour)

a training program requiring 2 hours

Monday, November 11, 2013

Tráining Coordinator's Signature

Employees Initials:

westk@tennk12.net 61029q68-2p9r





Chester County School System

Laura Poe

has completed

Asbestos Awareness (K-12 Full 2 Hour)

a training program requiring 2 hours

on

Monday, November 11, 2013

Tráining Coordinator's Signature

Employees Initials:

westk@tennk12.net 61029q68-2p9r





Chester County School System

Shane Burkeens

has completed

Asbestos Awareness (K-12 Full 2 Hour)

a training program requiring 2 hours

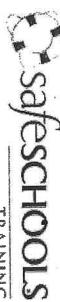
Monday, November 11, 2013

Tráining Coordinator's Signature

Employees Initials:

westk@tennk12.net 61029q68-2p9r





STATE OF TENNESSEE AHERA TRANSMITTAL/SUBMITTAL FORM

DATE: /-20-10

LEA SYSTEM NAME: Chester County Schools	LEA#: 120
ADDRESS: PO Box 327, Henderson, Tennessee 38340	
DESIGNATED PERSON: Mr. Ken West	_ PHONE: <u>731-989-5134</u>

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT	
		MANAGEMENT PLAN	
- 1		ASBESTOS FREE MANAGEMENT PLAN	
X		YEARLY PROGRESS REPORT	
		THREE YEAR REINSPECTION	
		OTHER (Please Explain)	

PERIODIC SURVEILLANCE REPORT

	AME:CHESTER COUNTY BOE DL NAME: JACKS CREEK ELEMENTA	 RY	-	120 NO.: <u>120-0025</u>	
BUILD	ING NAME: <u>MAIN</u>				
	RUCTIONS: AHERA regulations requi School building containin Fill in the HA#, Description the date removed in the ap	g ACBM must be inspon of ACBM, and Area	pected. Put the day Inspected. If the	te in the appropi ACBM has been	removed put
			1st six months Date	2nd six months Date	
			(Fall)	(Spring)	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	N/C	
2	Floor tile	All	Good	N/C	
3	Floor tile	All	Good	N/C	
4	Floor tile	All	Good	N/C	
	2x4 Ceiling tile	Ali	Good	N/C	
	No.			_	
	=				le .
	· ·				
	rty.			-	
SURV	EILLANCE INSPECTOR'S NAME (please p			IN CONDITION V	VRITE N/C
SURV (Surve	EILLANCE INSPECTOR'S SIGNATURE: _ sillance Inspector is not required to be AHERA	Nay h, s	Vichner		
AHER	A Accreditation Number/Date (if applicable):	ASBBIR0902047 / Th	<u> </u>		

ΓAHERA 9.0 (2/97)

STATE OF TENNESSEE AHERA TRANSMITTAL/SUBMITTAL FORM

DATE: MARCH 2010

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: PO Box 327, He	nderson, Tennessee 38340	
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
		ASBESTOS FREE MANAGEMENT PLAN
		YEARLY PROGRESS REPORT
X		THREE YEAR REINSPECTION
		OTHER (Please Explain)

		THE	REE YEA	R REINSF	PECTIO	N		
LEA NAME: Chester	County BO	E				LEA #: 12	0	
School Building Name	: Jacks C	reek Elemen	tary			Building #:	Main	
DATE OF IMPLEMEN				1988		INSPECTION	N DATE:	03/16/2010
		JMBER		UMBER	HAI	NUMBER	HAN	IUMBER
OF THE ST		1		2		3		4
	CURREN	T QUANTITY	CURRENT	QUANTITY	CURREN	IT QUANTITY	CURREN	T QUANTITY
AGRICULTURE			[1			
NAME OF THE PARTY								
15	MATERIAL D	ESCRIPTION		DESCRIPTION		DESCRIPTION		DESCRIPTION
OHMERC	Floo	r Tile	Floo	or Tile	Flo	or Tile	FIO	or Tile
7796			1.070		LAST 3		LAST 3	
CHECK ONE	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	YEAR	CURRENT	YEAR	CURRENT
TSI	12.11							
SURFACING								
MISCELLANEOUS	Х	X	X	X	X	X	Х	X
CHECK ONE				_			r	i i
ASSUMED ACBM		V		X	X	Х	X	X
CONFIRMED ACBM	Х	Х	X	+-^-				
NON-ACBM CHECK ONE		J ₁		-				
NON-FRIABLE	X	l x	X	X	Х	X	Х	X
FRIABLE								
EXPOSURE CONSIDERATION	N							
1 TO 5 (5 WORST)		1	1	1 1	1 1	1	1	1
DETERIORATION PHYSICAL DAMAGE	1	1	1	1	1	1	1	1
WATER DAMAGE	1	1	1	1	1	1	1	1
ACTIVITY/VIBRATION	2	2	2	2	2	2	2	2
EXPOSURE	1	1	1	1	1	11	1	11
ACCESSIBILITY	1	11	1	1	1	1	11	1 1
LENGTH OF EXPOSURE								
(CHECK ONE) 1 HOUR/WEEK								
5 HOUR/WEEK								
10 HOUR/WEEK								
20 HOUR/WEEK								V
40 HOUR/WEEK	X	X	X	X	X	X	X	X
EXPOSURE POPULATION (CHECK ALL APPLICABLE)								
MAINTENANCE	X	X	X	X	X	X	X	X
CUSTODIAL	X	X	X	Х	Х	X	X	X
FACULTY/STAFF	X	X	X	X	X	X	X	X
PUBLIC	Х	X	X	X	X	X	Х	X
ASSESSMENT								
(MARK FROM 1 TO 7)	5	5	5	5	5	5	5	5
**RESPONSE ACTIONS	J J	1 3		1 -			-	
(MARK FROM A TO H)							r	
	В	В	В	В	В	В	В	В
ACCECCM	ENT LEGEN	n .			RESPONS	E ACTIONS LE	GEND	
ASSESSIV	ENT LEGEN		I A.	Institute prever			closure	
1. Damaged/significantly	damaged TSI			O & M Program		F. Rei		
2. Damaged friable surface	cing ACBM			Repair		G. Iso		
3. Significantly damaged	friable surfaci	ng material		Encapsulate		H. Oth	ner	
4. Damaged/significantly	damaged frial	ble misc. ACB	V			NOTES		
ACBM with potential foACBM with potential fo	r damage	атале	*10.	myiquely accumed	ACBM was to	sted, attach TAHERA	A 6.2. TAHERA	6.3, TAHERA 6.9
7. Any remaining friable A	CBM or susp	ect ACBM	and	TAHERA 8.0				
r. Any remaining made /	.Julii or adap		** ["current" is differ	ent from "last 3	year", attach revised	TAHERA 6.4	and TAHERA 6.5
			444	Posta				
STEPHANIE PETTY			Stephane	c ing		ASBBIR09	10310/TN	_=1_
INSPECTOR (Typed Name)		SIGNATURE			ACCREDITA	ATION #/STA	ATE
			De CAL	2				
			11-40					
STEVE CHAMBLISS					_		1002145/TN_	
MANAGEMENT PLANNER	8		SIGNATURE			ACCREDIT	ATION #/ST/	ATE

School Building Name: Jacks Greek Elementary Building # Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 1988 INSPECTION DATE: 03/16/2010 HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA NUMBER HA N			THI	REE	YEA	R REINSF	PECTIO	N			
School Building Name: Jacks Creek Elementary DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 1988 INSPECTION DATE: 03/16/2010 AR NUMBER HA NUMBE	LEANAME: Chastor	County BO							± 12	Ω	
DATE OF IMPLEMENTATION OF MANAGEMENT PLAN 1988 INSPECTION DATE: 03/16/2010 HA NUMBER H							-				
TARRET DAMAGE ASSUMED AMAGE ACTIVITY/BARTION DETERIORATION 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_				DL A NI:	1000		3.			03/16/2010
CURRENT QUANTITY CURRENT VEAR CURREN	DATE OF IMPLEMEN			/IEINI F			НΔ				
MATERIAL DESCRIPTION MATERIAL	THE ST	HA NC	INIDEK		DA N	DINDLIN	T III	HOMBEN			
MATERIAL DESCRIPTION MATERIAL	W.	CURREN	TQUANTITY	CL	JRRENT	QUANTITY	CURREN	NT QUAN	TITY	CURREN	IT QUANTITY
MATERIAL DESCRIPTION Z42 Celling Tile CHECK ONE ISI SURRACING MISCELLANEOUS CHECK ONE ASSUMED ACBM CONFIRMED ACBM MON-ACBM CHECK ONE NON-FRIABLE FRABLE FRABLE WATERIAL DESCRIPTION MATERIAL DESCRIPTION LAST 3 CURRENT VEAR CU	0			1			Ì		1		1
CHECK ONE CHECK ONE CHECK ONE CHECK ONE ASSUMED ACBM CHECK ONE NON-FRABLE X X FRABLE X X FRABLE ACCESSIBILITY TO 5 IS WORST) DETERIORATION PHYSICAL DAMAGE 1 1 1 ACCESSIBILITY TO 1 IN THE ACCESSIBILITY TO 2 IN THE ACCESSIBILITY TO 3 IN THE ACCESSIBILITY TO 3 IN THE ACCESSIBILITY TO 4 IN THE ACCESSIBILITY TO 4 IN THE ACCESSIBILITY TO 5 IN THE ACCESSIBLE ACCE	AGRICULTURE E			J							
CHECK ONE TSI SURFACING SURFACING SURFACING WISCELLANEOUS CHECK ONE CHECK ON		MATERIAL D	ESCRIPTION	MAT	ERIAL I	DESCRIPTION	MATERIAL	DESCRI	PTION	MATERIAL	DESCRIPTION
CHECK ONE TSI SURFACING WISCELLANEOUS CHECK ONE ASSUMED ACBM CONFIRMED ACBM CONFIRMED ACBM CONFIRMED COMBINE CONFIRMED COMBINE CONFIRMED COMBINE CONFIRMED COMBINE CONFIRMED CON	OMMERC	2x4 Ce	iling Tile								
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TSI SURPACING MISCELLANEOUS X X X CHECK ONE ASSUMED ACBM CONFIRENDE ACBM NON-ACBM CHECK ONE NON-FRIABLE FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (\$ MORST) DETERIORATION 1 TO 6 (\$ MORST) DETERIORATION 1 TO 7 TO	CHECK ONE		CURRENT			CURRENT		CURF	RENT		CURRENT
MISCELLANEOUS X X		12/11									
CHECK ONE ASSUMED ACBM CONFIRMED ACCBM CONFIRMED ACCCBM CONFIRMED ACCCCBM CONFIRMED ACCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC											
ASSUMED ACBM	1	X	X								
CONFIRMED ACEM NON-ACRM CHECK ONE NON-FRIABLE FRIABLE X X X EXPOSURE CONSIDERATION 1 TO 6 (6 WORST) DETERIORATION 1 TO 6 (6 WORST) DETERIORATION 1 TO 6 (6 WORST) DETERIORATION 1 TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			T V	1							
NON-ACSM CHECK ONE NON-FRIABLE FRIABLE		X	X	-					-	-	
CHECK ONE NOM-FRIABLE FRABIE EX X X X EXPOSURE CONSIDERATION 1 0 1 1 DETERIORATION 1 1 1 DETERIORATION PHYSICAL DAMAGE WATER DAMAGE ACTIVITY/VIBRATION EXPOSURE CHECK ONE 1 1 1 LENGTH OF EXPOSURE CHECK ONE 1 HOUR/WEEK 20 HOUR/WEEK 20 HOUR/WEEK 20 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK 50 HOUR/WEEK 40 HOUR/WEEK 50 HOUR/W				-							
NOM-FRIABLE	1		1	100							
EXPOSURE COMBIDERATION 1											
TO 6 (\$ WORST) DETERIORATION PHYSICAL DAMAGE WATER DAMAGE ACTIVITY//BRATION EXPOSURE ACCESSIBILITY LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK 5 HOUR/WEEK 20 HOUR/WEEK 20 HOUR/WEEK 40 HOUR			X								
DETERIORATION		N									
PHYSICAL DAMAGE WATER DAMAGE WA		1	1	T							
WATER DAMAGE ACTIVITY/VIBRATION EXPOSURE ACTORYMERY 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
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ACCESSIBILITY LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK 5 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK 4	ACTIVITY/VIBRATION										
LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK 5 HOURWEEK 40 HOURWEEK 40 HOURWEEK 40 HOURWEEK 40 HOURWEEK 40 HOURWEEK 40 HOURWEEK CUSTODIAL FACULTY/STAFF PUBLIC ASSESSMENT FACULTY/STAFF PUBLIC ASSESSMENT WARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (EGNO **I STUDIES **I Solute **I Freviously assumed ACBM was tested, attach TAHERA 6.3, TAHERA 6.9 **I I "Current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year", attach revised TAHERA 6.5 **I I "current" is different from "last 3 year"											
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1 HOURWEEK 5 HOURWEEK 10 HOURWEEK 20 HOURWEEK 40 HOURWEEK 40 HOURWEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) MAINTENANCE CUSTODIAL FACULTY/STAFF PUBLIC ASSESSMENT (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM 1 TO 7) **RESPONSE ACTIONS LEGEND A. Institute preventative measures B. O. & M Program G. Isolate D. Encapsulate A. Institute preventative measures B. O. & M Program G. Isolate D. Encapsulate NOTES *If previously assumed ACBM was tested, stach TAILERA 6.3, TAHERA 6.9 and TAILERA 8.0 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 **If "c											
10 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) MAINTENANCE CUSTODIAL FACULT/YSTAFF PUBLIC ASSESSMENT (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM A TO H) B B B RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND CRESPONSE ACTIONS LEGEND A. Institute preventative measures B. O & M Program C. Repair C. Repai		Х	X								
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STEPHANIE PETTY INSPECTOR (Typed Name) STEVE CHAMBLISS ASBMPR 1002145/TN	6. ACBM with potential fo	r significant da	amage		*If p	reviously assumed	ACBM was ter	sted, attach	TAHERA	6.2, TAHERA	. 6.3, TAHERA 6.9
STEPHANIE PETTY INSPECTOR (Typed Name) SIGNATURE STEVE CHAMBLISS STEVE CHAMBLISS ASBBIR0910310/TN ACCREDITATION #/STATE	7. Any remaining friable A	CBM or suspe	ect ACBM		and I	"current" is differe	ent from "last 3	year", atta	ch revised	TAHERA 6.4	and TAHERA 6.5
STEVE CHAMBLISS SIGNATURE ASBBIRU910319/TIN ACCREDITATION #/STATE ASBBIRU910319/TIN ACCREDITATION #/STATE					a la	A					
INSPECTOR (Typed Name) SIGNATURE ACCREDITATION #/STATE STEVE CHAMBLISS ASBMPR1002145/TN	STEPHANIE PETTY			2	Whomas	1. 722 lg		ASI	BBIR091	0310/TN	
STEVE CHAMBLISS ASBMPR1002145/TN)		SIGNA	TURE						ATE
THE CHILLIAN BIOG				N	10	1					
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THE CHILLIAN BIOG	STEVE CHAMBLISS			14/4				Α	SBMPR	1002145/TN	
	MANAGEMENT PLANNER		-	SIGNA	TURE						ATE

STATE OF TENNESSEE AHERA TRANSMITTAL/SUBMITTAL FORM

DATE: 5/19/2011

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
		·ex
ADDRESS: PO Box 327, Hen	derson, Tennessee 38340	
	8	ψ.
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
and a second TWO well and control of	2 10 to to the control of the fit	ASBESTOS FREE MANAGEMENT PLAN
Х		YEARLY PROGRESS REPORT
	io.	THREE YEAR REINSPECTION
		OTHER (Please Explain)

TAHERA LO (2/97)

PERIODIC SURVEILLANCE REPORT

LEA NAME:CHESTER COUNTY BOE	LEA NO:	120
SCHOOL NAME: CHESTER COUNTY JUNIOR HIGH	SCHOOL NO.:	126-0010
JUILDING NAME: MAIN		

INSTRUCTIONS: AHERA regulations require a Periodic Surveillance be conducted every six (6) months. Each School building containing ACBM must be inspected. Put the date in the appropriate column. Fill in the HA#, Description of ACBM, and Area Inspected. If the ACBM has been removed put the date removed in the appropriate column. Keep the original with your Management Plan.

2nd six months 1st six months Date Date 5/18/11 (Spring) (Fall) **ACBM** DATE **ACBM** AREA DESCRIPTION OF ACBM HA# REMOVED CONDITION* INSPECTED CONDITION* N/C Good All 1 Floor tile 1800 sf N/C All Good Floor tile 212 sf 2 12 x 12 green & light green N/C All Good 4 Floor tile marbled 3066 sf N/C All Good Floor tile 5124 sf 5 N/C Good All 7 Floor tile 164 sf N/C Good All Ceiling tile N/C All Good Transite panels

*IF NO CHANGE IN CONDITION WRITE N/C

SURVEILLANCE INSPECTOR'S NAME (please print): Ken West

SURVEILLANCE INSPECTOR'S SIGNATURE: Yen West

(Surveillance Inspector is not required to be AHERA certified)

AHERA Accreditation Number/Date (if applicable):

VHERA 9.0 (2/97)

PERIODIC SURVEILLANCE REPORT

LEA NAME:CHESTER COUNTY BOE		LEA NO:	120	b.
SCHOOL NAME: CHESTER COUNTY MIDDLE SCH	OOL	SCHOOL NO.:	120-005	
BUILDING NAME: MAIN				

INSTRUCTIONS: AHERA regulations require a Periodic Surveillance be conducted every six (6) months. Each School building containing ACBM must be inspected. Put the date in the appropriate column. Fill in the HA#, Description of ACBM, and Area Inspected. If the ACBM has been removed put

the date removed in the appropriate column. Keep the original with your Management Plan.

CAMES TO SERVE	the date removed in the appropria	solven and a second	1st six months	2nd six months	
			Date	Date 5/18-11	
			(Fall)	(Spring)	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	N/C	
2	Floor tile	All	Good	N/C	
3	Floor tile	All *	Good	N/C	
4	Floor tile	All	Good	N/C	
5A	Floor tile	All	Good	N/C	
6	Floor tile	All	Good	N/C	
7A	Pipe Insulation	All	Good	N/C	
7B	Floor tile	All	Good	N/C	
8	Floor tile	All	Good	N/C	
	2x4 Ceiling tile	All	Good	N/C	
9A	Pipe Insulation	All	Good	N/C	
9B	Boiler wrap Insulation	All	Good	N/C	
9C	H2O Tank Insulation	N/A	N/A	Tank removed in	Selection (1) (2003)
	2x4 Ceiling tile	All	Good	N/C	
10A	Boiler Jacket	All	Good	N/C	
10B	Pipe Insulation	All	Good	N/C	

				•	
10B	Pipe Insulation	All	Good	N/C	
SURVE	ILLANCE INSPECTOR'S NAME (please print):	Ken Wes	F NO CHANGE IN	CONDITION W.	RITE N/C
SURVE (Surveill	ILLANCE INSPECTOR'S SIGNATURE: lance Inspector is not required to be AHERA certified)	en West		<u></u> .	
AHERA	Accreditation Number/Date (if applicable):			===	
TAHER	m A9.0~(2/97) . The first of the second states and $ m A9.0~(2/97)$			inches land	

LEA NAME:CHESTER COUNTY BOE	LEA NO:120
SCHOOL NAME: CHESTER COUNTY MIDDLE SCHOOL	SCHOOL NO.: 120-005
BUILDING NAME:MAIN	

and an analysis of the date removed in the appropriate column. Keep the original with your Management Plan.

	the date removed in the appropria		1st six months Date (Fall)	2nd six months Date 5/18/11 (Spring)	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
10C	Floor tile	Ail	Good	N/C	
	2x4 Ceiling tile	All	Good	N/C	
12	Floor tile	All	Good	N/C	
	2x4 Ceiling tile	All	Good	N/C	
13A	Floor tile	All	Good	N/C	
13B	Pipe Insulation	All	Good	N/C	
	2x4 Ceiling tile	All	Good	N/C	
			4		
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40.141.419		According to the contract of the contract		7	

		¥:			
22/10/2004				2	
	The state of the s	Promitted Law Science II (1)			
SURVEI	ILLANCE INSPECTOR'S NAME (please print): ILLANCE INSPECTOR'S SIGNATURE: ance Inspector is not required to be AHERA certified)	West.	F NO CHANGE IN	CONDITION W	RITE N/C
AHERA	Accreditation Number/Date (if applicable):			_	
TAHER	A 9.0 (2/97)		1		
11 31 44					færaledi. Fisioner

LEA NA	ME: CHESTER COUNTY BOE		LEA NO: _	120	
SCHOO!	LNAME: <u>EAST CHESTER ELEMENTARY</u>		SCHOOL N	O.: <u>120-0015</u>	
UILDIد	NG NAME: <u>MAIN</u>				
INSTR	UCTIONS: AHERA regulations require a Pe School building containing ACB Fill in the HA#, Description of A the date removed in the appropria	M must be inspe- CBM, and Area Is	cted. Put the date nspected. If the A the original with y	in the appropri CBM has been i our Managemer	ate column. emoved put
			Date	2nd six months Date 5/18/11 (Spring)	
HA#	DESCRIPTION OF ACBM	AREA- INSPECTED		ACBM	DATE REMOVED
1	Floor tile	All	Good	N/C	
2	Floor tile	All	Good	N/C	
3	Floor tile	All	Good	N/C	9
4	Floor tile	All	Good	N/C	. 2
5	Floor tile	All	Good	N/C	
6	Floor tile	All	Good	N/C	
7	Floor tile	All	Good	N/C	
8	Floor tile	All	Good	N/C	
9	Floor tile	All	Good	N/C	
	2x4 Ceiling tile	All	Good	N/C	
	, , , , , , , , , , , , , , , , , , ,				
SURVE	ILLANCE INSPECTOR'S NAME (please print): ILLANCE INSPECTOR'S SIGNATURE. lance Inspector is not required to be AHERA certified	in West	 F NO CHANGE IN - -	CONDITION WE	ITE N/C

AHERA Accreditation Number/Date (if applicable):

TAHERA 9.0 (2/97)

LEA NA	ME:CHESTER COUNTY BOE	_ ;	LEA NO:	120	
SCHOOL	NAME:WEST CHESTER ELEMENTARY		SCHOOL NO.: 120-030		
ZUILDI	NG NAME: <u>MAIN</u>		(4		
INSTR	UCTIONS: AHERA regulations require a Per School building containing ACBI Fill in the HA#, Description of AC the date removed in the appropriat	M must be inspec CBM, and Area In	ted. Put the date spected. If the A ne original with y	in the appropri CBM has been tour Managemer	ate column. removed put
			Date (Fall)	2nd six months Date	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBMCONDITION*	-ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	N/C	
2	Floor tile	All	Good	N/C	
4	Floor tile	All	Good	N/C	
5	Floor tile	All	Good	N/C	
6	2X4 Ceiling tile	All	Good	N/C	
					E:
- E					
			NO OTHER BI	CONTRACTOR	ATT MIC
SURVEI	LLANCE INSPECTOR'S NAME (please print):	Ken West	NO CHANGE IN	CONDITION WR	TEN/C
SURVEI (Surveilla	LLANCE INSPECTOR'S SIGNATURE: Accreditation Number/Date (if applicable):	in West			

LEA NA	ME:CHE	STER COUNTY BOE	_	LEA NO: _	120	
SCHOO:	L NAME:	JACKS CREEK ELEMENTARY		SCHOOL N	O.: <u>120-0025</u>	
3UILDI	NG NAME:	MAIN				
INSTR	UCTIONS	: AHERA regulations require a Poschool building containing ACB Fill in the HA#, Description of A the date removed in the appropria	M must be inspec CBM, and Area I	cted. Put the date nspected. If the A the original with y	in the appropri CBM has been to our Managemer	ate column. removed put
				1st six months Date (Fall)	Date 5/19/11 (Spring)	
HA#	DESCRIPT	TION OF ACBM	AREA INSPECTED	CONDITION*	ACBM	DATE REMOVED
1	Floor tile	1	All	Good	N/C	
2	Floor tile		All	Good	N/C	
3	Floor tile		All	Good	N/C	
4	Floor tile		All	Good	N/C	H
	2x4 Ceiling t	ile	All	Good	N/C	
			Yr .			
	Ų II					
·						
					*	
		ISPECTOR'S NAME (please print):	Ken West	F NO CHANGE IN	CONDITION WR	TTE N/C
SURVEI (Surveill:	LLANCE IN ance Inspecto	SPECTOR'S SIGNATURE: or is not required to be AHERA certified;	en Wed	L		
AHERA	Accreditation	n Number/Date (if applicable):				

LEA NA	ME: CHESTER COUNTY BOE	_	LEA NO:	120			
SCHOO1	L NAME: NORTH CHESTER ELEMENTARY	<u>-</u>	SCHOOL	NO.: NA			
UILDII	NG NAME: MAIN		6 8				
INSTR'	NSTRUCTIONS: AHERA regulations require a Periodic Surveillance be conducted every six (6) months. Each School building containing ACBM must be inspected. Put the date in the appropriate column. Fill in the HA#, Description of ACBM, and Area Inspected. If the ACBM has been removed put the date removed in the appropriate column. Keep the original with your Management Plan. 1st six months 2nd						
			Date	Date 5/18/11 (Spring)			
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM	DATE REMOVED		
2	Floor tile	All	Good	N/C			
3	Floor tile	All	Good	N/C			
4	Floor tile	All	Good	N/C			
5	Floor tile	All	Good	N/C			
6	Floor tile	All	Good	N/C			
7	Floor tile	All	Good	N/C			
8	Floor tile	All	Good	N/C	1		
).	2x4 Ceiling Tile	All	Good	N/C			
C+C							
1.27							
		- 19 Acres	TNO GUANGE BY	COMPLETONIUM	TOTE NI/C		
SURVE	LLANCE INSPECTOR'S NAME (please print):	KenWes	NO CHANGE IN	CONDITION WK	TIE MC		
SURVE	11/	en West					
AHERA	Accreditation Number/Date (if applicable):						

DATE: 11/2-1/11

LEA SYSTEM NAME:	Chester County Schools		LEA#: 120	
ADDRESS: PO Box 327, He	enderson, Tennessee 38340	Bi.	e .	
(4)	*	÷		
n 12	<i>t</i> -			
ÿ	ш ,,	10 T	120.	
DESIGNATED PERSON:	Mr. Ken West		PHONE: <u>731-989-5134</u>	
	× \$ \$ *			

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
•	54	ASBESTOS FREE MANAGEMENT PLAN
X	¥1	YEARLY PROGRESS REPORT
	The state of the s	THREE YEAR REINSPECTION
150	s .	OTHER (Please Explain)

I LILL	DIC DURY BLEET TO THE				
LEA NA	AME:CHESTER COUNTY BOE	<u> </u>	LEA NO:_	120	
СНОС	L NAME:JACKS CREEK ELEMENTAR	Y	SCHOOL 1	NO.: <u>120-0025</u>	<u> </u>
חזווו ווי	DICNIAME, MAIN		w ³		
	ING NAME: <u>MAIN</u>		_		
INSTF	RUCTIONS: AHERA regulations require School building containing Fill in the HA#, Description the date removed in the app	ACBM must be insported and Area	ected. Put the dat Inspected. If the 2	e in the appropr ACBM has been	removed put
			Isr six months Da(e11/18/2011 (Fall)	2nd six months Date (Spring)	
		AREA	ACBM	ACBM	DATE
HA#	DESCRIPTION OF ACBM	INSPECTED	CONDITION*	CONDITION*	REMOVED
1	Floor tile	All	Good	N/C	
2	Floor tile	All	Good	N/C	
3	Floor tile	All	Good	N/C	
4	Floor tile	All	Good	N/C	
	2x4 Ceiling tile	All	Good	N/C	
		5			
	2		•		
9/22		Ţ.	a		
		*			
Ni.				i.	
	-				M
		•	9		
-					
		K			
					-1-
SURV	EILLANCE INSPECTOR'S NAME (please pr	Len West	*IF NO CHANGE	IN CONDITION V	VRITE N/C
(Surve	illance Inspector is not required to be AHERA	ćertified)			

AHERA Accreditation Number/Date (if applicable):

DATE: 5-17-2012

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: PO Box 327,	Henderson, Tennessee 38340	
		396.
		25
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT	
		MANAGEMENT PLAN	
		ASBESTOS FREE MANAGEMENT PLAN	
X	≅: 	YEARLY PROGRESS REPORT	
		THREE YEAR REINSPECTION	
		OTHER (Please Explain)	

<u>PERI</u>	ODIC SUR	VEILLANCE REPORT				
LEA N	AME: <u>CHE</u>	STER COUNTY BOE		LEA NO: _	120	
SCHO	OL NAME:	JACKS CREEK ELEMENTARY		SCHOOL	NO.: <u>120-002</u>	5
UILDد	ING NAME: _	MAIN		_		
INSTI	RUCTIONS	AHERA regulations require a language School building containing AC Fill in the HA#, Description of the date removed in the appropriate of the same series.	BM must be insp ACBM, and Area	ected. Put the dat Inspected. If the A the original with	te in the approp ACBM has been your Manageme	riate column. removed put
				1st six months Date11/18/2011	2nd six months Date 5 -/6-/2	
HA#	DESCRIPTION	ON OF ACBM	AREA INSPECTED	(Fall) ACBM CONDITION*	(Spring) ACBM CONDITION*	DATE REMOVED
1	Floor tile		All	Good	N/C	
2	Floor tile		All	Good	N/C	
3	Floor tile		All	Good	N/C	
4	Floor tile		All	Good	N/C	
	2x4 Ceiling tile		All	Good	N/C	
				*IF NO CHANGE I	N CONDITION W	RITE N/C

SURVEILLANCE INSPECTOR'S NAME (please print):

SURVEILLANCE INSPECTOR'S SIGNATURE:

(Surveillance Inspector is not required to be AHERA certified)

AHERA Accreditation Number/Date (if applicable):

TAHERA 9.0 (2/97)

DATE: 12/04/12

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: PO Box 327, I	Henderson, Tennessee 38340	*
DESIGNATED PERSON: _	Mr. Ken West	PHONE: <u>731-989-5134</u>

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	MANAGEMENT PLAN		
		ASBESTOS FREE MANAGEMENT PLAN		
X		SIX MONTH PROGRESS REPORT		
		THREE YEAR REINSPECTION		
		OTHER (Please Explain)		

LEA N.	AME: <u>CHESTER COUNTY BOE</u>		LEA NO: _	120		
CHOC	CHOOL NAME:JACKS CREEK ELEMENTARY			SCHOOL NO.: 120-0025		
BUILD	ING NAME: MAIN		_			
INSTI	Fill in the HA#, Descrip	quire a Periodic Surveilla ing ACBM must be insp tion of ACBM, and Area appropriate column. Keep	pected. Put the day Inspected. If the A	te in the approp ACBM has been	riate column. removed put	
1st six months 2nd six months Date Date (Spring)						
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED	
1	Floor tile	All	Good	N/C		
2	Floor tile	All	Good	N/C		
3	Floor tile	All	Good	N/C		
4	Floor tile	All	Good	N/C		
	2x4 Ceiling tile	All	Good	N/C		
			*IDNO GUANCE	N COMPATION "	JDITE NIC	
SURV	EILLANCE INSPECTOR'S NAME (please	print): Key West	*IF NO CHANGE	EN CONDITION V	VKITE N/C	
SURV	EILLANCE INSPECTOR'S SIGNATURE: illance Inspector is not required to be AHER	Ken West		<u> </u>		
AHER	A Accreditation Number/Date (if applicable):				

DATE: 4-11-13

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: PO Box 327,	Henderson, Tennessee 38340	
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
		ASBESTOS FREE MANAGEMENT PLAN
X		YEARLY PROGRESS REPORT/ SIX MONT
		THREE YEAR REINSPECTION
		OTHER (Please Explain)

LEA N	AME: CHESTER COUNTY BOE		LEA NO:	120	
СНО	OL NAME:JACKS CREEK ELEMENTARY		SCHOOL	NO.: <u>120-002</u>	5
BUILD	ING NAME: <u>MAIN</u>		-		
INST	RUCTIONS: AHERA regulations require a H School building containing AC Fill in the HA#, Description of A the date removed in the appropr	BM must be insp ACBM, and Area	pected. Put the da Inspected. If the a the original with	te in the approp ACBM has been your Manageme	riate column. removed put
			1st six months Date	2nd six months Date:4-9-13	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	(Fall) ACBM CONDITION*	(Spring) ACBM CONDITION*	DATE REMOVED
1	Floor tile	All		N/C	
2	Floor tile	All		N/C	
3	Floor tile	All		N/C	
4	Floor tile	All		N/C	
	2x4 Ceiling tile	All		N/C	
_					
SURV	EILLANCE INSPECTOR'S NAME (please print):	Ken We	*IF NO CHANGE I	N CONDITION W	'RITE N/C
(Surve	illance Inspector is not required to be AHERA certifie	ed)	9		

AHERA Accreditation Number/Date (if applicable):

DATE: 16-15-13

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: 970 East Main	St. Henderson, TN 38340	
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>

ORIGINAL CORRECTION/DEFICIENCY SUBMISSION		TYPE OF DOCUMENT
		MANAGEMENT PLAN
		ASBESTOS FREE MANAGEMENT PLAN
i.		YEARLY PROGRESS REPORT
X		THREE YEAR REINSPECTION
		OTHER (Please Explain)

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: Chester County Middle School INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER OF THE 87 3 4 CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile * 7796 LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR CHECK ONE YEAR YEAR TSI SURFACING Х Х MISCELLANEOUS Х CHECK ONE **ASSUMED ACBM** X X Х X CONFIRMED ACBM NON-ACBM CHECK ONE X X X Х X Χ Х NON-FRIABLE Х **FRIABLE** EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1 1 1 1 PHYSICAL DAMAGE 1 1 1 1 1 WATER DAMAGE 1 2 2 2 2 2 2 **ACTIVITY/VIBRATION** 2 1 1 1 1 1 **EXPOSURE** 1 1 **ACCESSIBILITY** 1 LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOURWEEK X 40 HOURWEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X X Х Х MAINTENANCE Х X X Χ X Х X X CUSTODIAL X X X X Х X X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B В В В В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND E. Enclosure Institute preventative measures Remove O & M Program Damaged/significantly damaged TSI G. Isolate Repair Damaged friable surfacing ACBM H. Other 3. Significantly damaged friable surfacing material D. Encapsulate 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage NOTES *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 ACBM with potential for significant damage 7. Any remaining friable ACBM or suspect ACBM and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6:4 and TAHERA 6:5 Hipheni Letys SIGNATURE Stiffuni Latys A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE **INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE School Building Name: Chester County Middle School Building #: Main INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER THE ST 7B 6 7A 5A THE STATE OF **CURRENT QUANTITY** CURRENT QUANTITY **CURRENT QUANTITY CURRENT QUANTITY** MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Pipe Insulation 7796* LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR CHECK ONE YEAR YEAR Х X TSI SURFACING MISCELLANEOUS X X X X Х CHECK ONE ASSUMED ACBM X Х Х **CONFIRMED ACBM** Х NON-ACBM CHECK ONE Х Х X Х X X NON-FRIABLE X **FRIABLE** EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 1 DETERIORATION 1 1 1 PHYSICAL DAMAGE 1 1 1 1 WATER DAMAGE 1 1 1 2 2 2 2 2 **ACTIVITY/VIBRATION** 2 2 **EXPOSURE** 1 **ACCESSIBILITY** 1 LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK Х Х 5 HOUR/WEEK 10 HOUR/WEEK 20 HOURWEEK Х 40 HOUR/WEEK X EXPOSURE POPULATION (CHECK ALL APPLICABLE) MAINTENANCE х X X X X X CUSTODIAL X X X Х X Х X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В В В R RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures E Enclosure O & M Program Remove Damaged/significantly damaged TSI G. Isolate C. Repair Damaged friable surfacing ACBM 3. Significantly damaged friable surfacing material D. Encapsulate 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage NOTES *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stephnie Latys SIGNATURE Stephnie Letys A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty **ACCREDITATION #/STATE** MANAGEMENT PLANNER

THREE YEAR REINSPECTION									
LEA NAME: Cheste	r County BO	E	*			_ LEA #: _12	.0		
School Building Name						Building #:			
DATE OF IMPLEMEN	O MOITATION OF	MANAGEM	ENT PLAN:	JMBER	НА	INSPECTION NUMBER		10/15/13 NUMBER	1000181
OF THE STATE	9	Α	5)B		9C]
AGRICUITURE	CURREN	T QUANTITY	CURRENT	QUANTITY	GURKE	NT QUANTITY	CURREN	T QUANTITY	
A CANCOLLAND	MATERIAL D	ESCRIPTION	I I MATERIALΓ	DESCRIPTION	l MATERIAI	L DESCRIPTION	MATERIAL	DESCRIPTION	
Onme of		sulation	Boile	r wrap	H2	O Tank	2x4 C	eiling Tile	
1796			Insu	lation	lns	sulation			
CHECK ONE	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	
TSI SURFACING	Х	Х	Х	X	Х	Х			-
MISCELLANEOUS CHECK ONE							X	X	
ASSUMED ACBM					V	~	X	X	
CONFIRMED ACBM NON-ACBM	Х	X	X	X	Х	Х			力膜
CHECK ONE NON-FRIABLE									
FRIABLE EXPOSURE CONSIDERATION	X	X	X	X	Х	X	X	X	
1 TO 5 (5 WORST) DETERIORATION	2	2	2] 2	2 1	2	2	2	1
PHYSICAL DAMAGE	11	1	1	1 1	1	1	1	1	
WATER DAMAGE ACTIVITY/VIBRATION	1 2	1 2	1 2	2	2	2	2	2	
EXPOSURE ACCESSIBILITY	1	1	1	1 1	1 1	1	1	1	
LENGTH OF EXPOSURE (CHECK ONE)									
1 HOURWEEK 5 HOURWEEK	X	X	X	X	X	X	X	X	
10 HOUR/WEEK 20 HOUR/WEEK									
40 HOURWEEK			irinalistra indiami	Hindolyko: Tallolyki				ninconnections and the	
(CHECK ALL APPLICABLE)	X	X	X	l x	l x l	X	X	X	
MAINTENANCE CUSTODIAL	X	X	x	X	X	X	X	X	
FACULTY/STAFF PUBLIC									
ASSESSMENT (MARK FROM 1 TO 7)									
**RESPONSE ACTIONS	5	5	5	5	5	5	7 Dukanangan	7 80308880000	
(MARK FROM A TO H)	В	В	В	В	В	В	В	B	
ASSESSM	ENT LEGEND		A. Ir	nstitute prevent		E ACTIONS LEG			
Damaged/significantly a Damaged friable surface	damaged TSI		B. C	& M Program Repair		F. Ren G. Isol	nove		
Significantly damaged Damaged/significantly	friable surfacir	ig material	D: E	ncapsulate		H Oth			
5. ACBM with potential fo	r damage		A PAIRLES S		AVPDAM	NOTES ited, attach TAHERA		FILE TOWNS	
ACBM with potential fo Any remaining friable A	CBM or suspe	ect ACBM	T bnd T	AHERA 8.0		year", attach revised			
		Stilu.		ox is differe			7		- I mil
Stephanie Petty INSPECTOR (Typed Name))	S	å latty SIGNATURE Laty			A-MP-47891 ACCREDITA			
Stephanie Petty		Stephenic	late			A-MP-4789	1-26076/TN	1	
MANAGEMENT PLANNER			SIGNATURE			ACCREDITA			

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE School Building Name: Chester County Middle Building #: Cafe INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile 2x4 Ceiling Tile LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR YEAR CHECK ONE YEAR TSI SURFACING X MISCELLANEOUS CHECK ONE X X ASSUMED ACBM Х X CONFIRMED ACBM NON-ACBM CHECK ONE Х **NON-FRIABLE** X X X FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION 1 1 PHYSICAL DAMAGE 1 1 1 WATER DAMAGE 3 3 1 1 **ACTIVITY/VIBRATION** 2 2 1 1 **EXPOSURE ACCESSIBILITY** 1 1 LENGTH OF EXPOSURE (CHECK ONE) X Х 1 HOURWEEK **5 HOURWEEK** 10 HOUR/WEEK 20 HOUR/WEEK X **40 HOUR/WEEK** X EXPOSURE POPULATION (CHECK ALL APPLICABLE) X MAINTENANCE x $\overline{\mathsf{x}}$ Χ Х CUSTODIAL FACULTY/STAFF $\overline{\mathsf{x}}$ X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 7 7 5 **RESPONSE ACTIONS (MARK FROM A TO H) R R В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND E. Enclosure A. Institute preventative measures B. O & M Program F. Remove Damaged/significantly damaged TSI Damaged friable surfacing ACBM C. Repair G. Isolate H. Other D. Encapsulate 3. Significantly damaged friable surfacing material 4. Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage NOTES *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0. ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stepheni Letty SIGNATURE Stepheni Lety A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE **INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty SIGNATURE ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: AGRI School Building Name: Chester County Middle School DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: INSPECTION DATE: 10/15/13 THE STATE OF THE PARTY OF THE P HA NUMBER HA NUMBER HA NUMBER HA NUMBER 10B 10C 10A W. **CURRENT QUANTITY** CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile Pipe Insulation Floor Tile **Boiler Jacket** 7796* LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR YEAR YEAR CHECK ONE X Х Х X TSI SURFACING X X MISCELLANEOUS CHECK ONE Х X **ASSUMED ACBM** X $\overline{\mathsf{x}}$ X X $\overline{\mathsf{x}}$ CONFIRMED ACBM X NON-ACBM CHECK ONE X NON-FRIABLE X X $\overline{\mathsf{x}}$ Х **FRIABLE** EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 2 2 1 1 PHYSICAL DAMAGE 1 1 1 1 1 1 WATER DAMAGE 2 2 2 2 2 2 2 2 **ACTIVITY/VIBRATION** 1 1 1 1 **EXPOSURE** 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X X Х Х Х 1 HOURWEEK **5 HOUR/WEEK** 10 HOUR/WEEK 20 HOUR/WEEK X X 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X X X X X MAINTENANCE X X X Х X X **CUSTODIAL** Х X FACULTY/STAFF PUBLIC ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 RESPONSE ACTIONS (MARK FROM A TO H) В В В В В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND E. Enclosure Institute preventative measures F. Remove B. O & M Program Damaged/significantly damaged TSI C. Repair Damaged mable surfacing ACBM H. Other D. Encapsulate Significantly damaged friable surfacing material 4. Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage NOTES ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stiffeni Petz SIGNATURE Stiffeni Petz A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE SIGNATURE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: _Chester County BOE Buisness Building #: Chester County Middle School Building Name: **INSPECTION DATE:** 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER THES 12 W. CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile Floor Tile 7796+3 LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR YEAR CHECK ONE YEAR TSI SURFACING X Х Х **MISCELLANEOUS** CHECK ONE ASSUMED ACBM X CONFIRMED ACBM NON-ACBM CHECK ONE **NON-FRIABLE** X Х FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1 1 PHYSICAL DAMAGE 1 1 WATER DAMAGE 1 2 1 1 2 **ACTIVITY/VIBRATION** 2 2 **EXPOSURE ACCESSIBILITY** 1 LENGTH OF EXPOSURE (CHECK ONE) X Х 1 HOUR/WEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOUR/WEEK X 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X MAINTENANCE X X CUSTODIAL X X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 7 7 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B B RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND E Enclosure Institute preventative measures O & M Program F Remove 1. Damaged/significantly damaged TSI G. Isolate 2. Damaged friable surfacing ACBM C. Repair D. Encapsulate H. Other 3. Significantly damaged friable surfacing material 4. Damaged/significantly damaged friable misc. ACBM NOTES 5. ACBM with potential for damage ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9, and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stipfuni Perty: SIGNATURE Stipfuni Perty: A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE **INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: Chester County Middle INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER THE 87 13A 13B W. CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY 1/1/20 MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile Pipe Insulation Floor Tile LAST 3 YEAR LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR CHECK ONE YEAR Х X TSI SURFACING MISCELLANEOUS X X X CHECK ONE X ASSUMED ACBM Х X X CONFIRMED ACBM NON-ACBM CHECK ONE X X NON-FRIABLE X X X X FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 2 2 1 DETERIORATION 2 2 1 PHYSICAL DAMAGE 1 1 WATER DAMAGE 1 1 1 1 1 2 1 **ACTIVITY/VIBRATION** 2 1 1 2 1 1 **EXPOSURE** 1 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X X X X 1 HOURWEEK 5 HOUR/WEEK 10 HOUR/WEEK 20 HOURWEEK 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X **MAINTENANCE** Х Χ Х X CUSTODIAL X Х X FACULTY/STAFF PUBLIC ASSESSMENT (MARK FROM 1 TO 7) 7 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures. E. Enclosure F. Remove O & M Program Damaged/significantly damaged TSI G. Isolate C. Damaged friable surfacing ACBM Repair H. Other D. Encapsulate Significantly damaged friable surfacing material 4. Damaged/significantly damaged friable misc, ACBM 5. ACBM with potential for damage NOTES *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9. ACBM with potential for significant damage 7. Any remaining friable ACBM or suspect ACBM and TAHERA 8.0 ** if "current" is different from "last 3 year", attach revised PAHERA 6.4 and TAHERA 6.5 Stipheni Porty SIGNATURE Stipheni Pety A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE **INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty SIGNATURE ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE School Building Name: East Chester Elementary Building #: Main INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER THE 83 3 **CURRENT QUANTITY** CURRENT QUANTITY CURRENT QUANTITY **CURRENT QUANTITY** AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile 7796 LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR CHECK ONE YEAR YEAR TSI SURFACING $\overline{\mathsf{x}}$ Х X **MISCELLANEOUS** Х X Х CHECK ONE ASSUMED ACBM X X X CONFIRMED ACBM NON-ACBM CHECK ONE X X Χ Х X Х Х NON-FRIABLE X FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 1 1 1 DETERIORATION 1 1 1 1 PHYSICAL DAMAGE 1 1 1 1 WATER DAMAGE 1 1 2 2 2 2 2 2 2 2 **ACTIVITY/VIBRATION** 1 1 1 1 **EXPOSURE ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOUR/WEEK $\overline{\mathbf{x}}$ X **40 HOUR/WEEK** EXPOSURE POPULATION (CHECK ALL APPLICABLE) X **MAINTENANCE** X $\overline{\mathsf{x}}$ $\overline{\mathsf{x}}$ X X X X X CUSTODIAL X X X X X X Х X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В В В В В В В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND Institute preventative measures Enclosure Remove B. O & M Program Damaged/significantly damaged TSI C. Repair G. Isolate Damaged friable surfacing ACBM 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM NOTES ACBM with potential for damage *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9. ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM and TAHERA 8.0 ** If "ourrent" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stiphui latz SIGNATURE Stiphui letz A-MP-47891-26076/TN Stephanie Petty **ACCREDITATION #/STATE INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE SIGNATURE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: East Chester Elementary INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: WHE SO HA NUMBER HA NUMBER HA NUMBER HA NUMBER 8 6 5 WA C CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY **CURRENT QUANTITY** AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR CHECK ONE YEAR YEAR TSI SURFACING X X **MISCELLANEOUS** Х CHECK ONE ASSUMED ACBM X Х Х CONFIRMED ACBM $\overline{\mathsf{x}}$ NON-ACBM CHECK ONE $\overline{\mathsf{x}}$ X Х Χ X X X Х NON-FRIABLE FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1 1 1 PHYSICAL DAMAGE 1 1 1 1 1 1 WATER DAMAGE 1 2 2 2 2 2 2 2 **ACTIVITY/VIBRATION** 1 1 1 1 1 **EXPOSURE** 1 **ACCESSIBILITY** 1 LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOUR/WEEK X X X X 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X MAINTENANCE X X X X X X CUSTODIAL X Х Х X Х X Х Х FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) B В В В В В В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures E. Enclosure F. Remove B. O & M Program Damaged/significantly damaged TSI G. Isolate C. Repair Damaged friable surfacing ACBM H. Other 3. Significantly damaged friable surfacing material D. Encapsulate 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage NOTES *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stipheni Lety SIGNATURE Stipheni Lety A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty SIGNATURE ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main East Chester Elementary School Building Name: INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER! HA NUMBER THE 87 **CURRENT QUANTITY** CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile Floor Tile 7796* LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR YEAR CHECK ONE YEAR TSI SURFACING X Х Х Х **MISCELLANEOUS** CHECK ONE ASSUMED ACBM **CONFIRMED ACBM** NON-ACBM CHECK ONE **NON-FRIABLE** X **FRIABLE** EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1 1 1 PHYSICAL DAMAGE 1 1 1 WATER DAMAGE 1 2 2 1 **ACTIVITY/VIBRATION** 2 2 1 **EXPOSURE ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X Х 1 HOURWEEK **5 HOURWEEK** 10 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X MAINTENANCE Х Х X Х CUSTODIAL FACULTY/STAFF Х Х **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 7 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B B RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND E. Enclosure Institute preventative measures B. O & M Program Remove Damaged/significantly damaged TSI G. Isolate C. Repair Damaged friable surfacing ACBM H. Other D. Encapsulate Significantly damaged friable surfacing material 4. Damaged/significantly damaged friable misc. ACBM NOTES ACBM with potential for damage ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9. and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stiffuni Petys SIGNATURE Stiffuni Petys A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: Jacks Creek Elementary INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER 2 3 TA CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 CURRENT LAST 3 CURRENT CURRENT CURRENT YEAR YEAR YEAR YEAR CHECK ONE TSI SURFACING $\overline{\mathsf{X}}$ X $\overline{\mathbf{x}}$ X Х Х **MISCELLANEOUS** CHECK ONE ASSUMED ACBM X $\overline{\mathbf{x}}$ X X Х X Х CONFIRMED ACBM X NON-ACBM CHECK ONE X X X **NON-FRIABLE** Х **FRIABLE** EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 1 1 1 DETERIORATION 1 1 1 1 PHYSICAL DAMAGE 1 1 1 1 1 1 1 WATER DAMAGE 2 2 2 2 2 2 2 2 **ACTIVITY/VIBRATION** 1 1 1 1 **EXPOSURE** 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK **5 HOUR/WEEK** 10 HOURWEEK 20 HOUR/WEEK X X X X X Х X 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X X X Х X Χ X MAINTENANCE X X X X Х $\overline{\mathbf{x}}$ X X CUSTODIAL х X X Х X FACULTY/STAFF Х Х X PUBLIC ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B В В В B В В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND Institute preventative measures E. Enclosure B. O & M Program Damaged/significantly damaged TSI Repair G. Isolate Damaged friable surfacing ACBM C. H. Other D. Encapsulate 3. Significantly damaged friable surfacing material Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage NOTES *If previously, assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 *If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM Stiphui Letz SIGNATURE Hiphui Letz A-MP-47891-26076/TN Stephanie Petty **ACCREDITATION #/STATE INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: Jacks Creek Elementary INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY **CURRENT QUANTITY** MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile 1796 LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR YEAR CHECK ONE YEAR TSI SURFACING MISCELLANEOUS CHECK ONE X X ASSUMED ACBM CONFIRMED ACBM NON-ACBM CHECK ONE **NON-FRIABLE** Х FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1 PHYSICAL DAMAGE 1 WATER DAMAGE 1 1 **ACTIVITY/VIBRATION** 1 1 **EXPOSURE** 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X 1 HOURWEEK Х **5 HOURWEEK** 10 HOURWEEK 20 HOURWEEK 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) X MAINTENANCE CUSTODIAL Х Х FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 7 7 **RESPONSE ACTIONS (MARK FROM A TO H) В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures El Enclosure F. Remove B. O & M Program Damaged/significantly damaged TSI G. Isolate C. Repair 2. Damaged friable surfacing ACBM. H. Other D. Encapsulate 3. Significantly damaged friable surfacing material Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage NOTES *If previously assumed AUBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 6. ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM Stepheni Lety SIGNATURE Stepheni Lety A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: North Chester Elementary INSPECTION DATE: 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER 5 3 4 CURRENT QUANTITY **CURRENT QUANTITY CURRENT QUANTITY** CURRENT QUANTITY AGRICULTURE Men MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR YEAR CHECK ONE YEAR TSI SURFACING Х X X Х X Х X **MISCELLANEOUS** CHECK ONE ASSUMED ACBM X X X X Х CONFIRMED ACBM Х NON-ACBM CHECK ONE X X X Х X **NON-FRIABLE** FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 1 1 1 1 1 DETERIORATION 1 1 PHYSICAL DAMAGE 1 1 1 1 1 1 1 1 WATER DAMAGE 1 1 2 2 2 2 2 **ACTIVITY/VIBRATION** 2 1 1 1 **EXPOSURE** 1 1 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK **5 HOURWEEK** 10 HOURWEEK 20 HOUR/WEEK X X Х Х X **40 HOURWEEK** X EXPOSURE POPULATION (CHECK ALL APPLICABLE) MAINTENANCE Х X X X X X X CUSTODIAL Х X Х FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 RESPONSE ACTIONS (MARK FROM A TO H) В В В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND E. Enclosure A. Institute preventative measures F. Remove B. O & M Program 1. Damaged/significantly damaged TSI G. Isolate C. Repair Damaged friable surfacing ACBM D. Encapsulate H. Other Significantly damaged friable surfacing material Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage NOTES ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM *If previously assumed AGBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9. and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stiphani Perty SIGNATURE Stiphani Pety A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: North Chester Elementary INSPECTION DATE: DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 10/15/13 HA NUMBER HA NUMBER HA NUMBER HA NUMBER THE 87 8 6 CURRENT QUANTITY CURRENT QUANTITY **CURRENT QUANTITY** CURRENT QUANTITY AGRICULTURE Mea MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile 2x4 Ceiling Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR CHECK ONE YEAR YEAR TSI SURFACING X X Х Х Х X Х **MISCELLANEOUS** CHECK ONE Χ X ASSUMED ACBM X X X Х Х CONFIRMED ACBM Х **NON-ACBM** CHECK ONE X Х NON-FRIABLE X X FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 1 1 1 DETERIORATION 1 PHYSICAL DAMAGE 1 1 1 1 1 1 1 1 WATER DAMAGE 1 1 1 1 1 1 2 2 2 1 2 2 1 **ACTIVITY/VIBRATION** 2 1 **EXPOSURE** 1 1 1 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X 1 HOURWEEK X **5 HOUR/WEEK** 10 HOUR/WEEK 20 HOUR/WEEK X X X X Х **40 HOUR/WEEK** Х EXPOSURE POPULATION (CHECK ALL APPLICABLE) х MAINTENANCE Х CUSTODIAL X Х X X X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 RESPONSE ACTIONS (MARK FROM A TO H) В В В R R B RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures E. Enclosure F. Remove B. O & M Program Damaged/significantly damaged TSI Damaged friable surfacing ACBM Significantly damaged friable surfacing material Repair G. Isolate D. Encapsulate H. Other Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage NOTES ACBM with potential for significant damage. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9. and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5. Stipheni Pertys SIGNATURE Stiphenii Pertys A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty MANAGEMENT PLANNER ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: West Chester Elementary **INSPECTION DATE:** 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER 4 2 3 1 W. **CURRENT QUANTITY CURRENT QUANTITY** CURRENT QUANTITY **CURRENT QUANTITY** AGRICULTURE | MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile 7796* LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT CHECK ONE YEAR YEAR YEAR YEAR TSI SURFACING Х X X X X **MISCELLANEOUS** CHECK ONE ASSUMED ACBM X Χ Х Х CONFIRMED ACBM X Х Х Х NON-ACBM CHECK ONE X X X **NON-FRIABLE FRIABLE** EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 1 1 DETERIORATION 1 1 1 PHYSICAL DAMAGE 1 1 1 1 1 1 1 WATER DAMAGE 2 2 2 2 2 **ACTIVITY/VIBRATION** 2 2 2 **EXPOSURE** 1 1 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK **5 HOURWEEK** 10 HOUR/WEEK 20 HOUR/WEEK X X Χ X X X Х X **40 HOUR/WEEK** EXPOSURE POPULATION (CHECK ALL APPLICABLE) X X х **MAINTENANCE** X X Х **CUSTODIAL** Х Х Х x Y X FACULTY/STAFF Х **PUBLIC** ASSESSMEN (MARK FROM 1 TO 7) 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) B В В В B RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND Institute preventative measures E. Enclosure Damaged/significantly damaged TSI B. O & M Program Remove Isolate Repair Damaged friable surfacing ACBM H Other Significantly damaged friable surfacing material D. Encapsulate. Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage NOTES *If previously assumed AGBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0. ** If "ourrent" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5. ACBM with potential for significant damage Any remaining friable ACBM or suspect ACBM Stippeni Pety: SIGNATURE Stippeni Pety: A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE INSPECTOR (Typed Name) A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE SIGNATURE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: West Chester Elementary DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: INSPECTION DATE: 10/15/13 HA NUMBER HA NUMBER HA NUMBER HA NUMBER N CURRENT QUANTITY CURRENT QUANTITY **CURRENT QUANTITY** CURRENT QUANTITY AGRICUITURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YFAR YEAR CHECK ONE YEAR YEAR TSI SURFACING Х x **MISCELLANEOUS** Х X CHECK ONE Х X ASSUMED ACBM CONFIRMED ACBM Х Х NON-ACBM CHECK ONE NON-FRIABLE X X **FRIABLE** EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1 PHYSICAL DAMAGE 1 1 1 1 WATER DAMAGE 1 1 **ACTIVITY/VIBRATION** 2 2 1 1 2 1 **EXPOSURE** 2 ACCESSIBILITY 1 LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK **5 HOURWEEK** 10 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) Χ X MAINTENANCE X X Χ Х **CUSTODIAL** X FACULTY/STAFF X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures E. Enclosure Remove Damaged/significantly damaged TSI O & M Program G. Isolate C Repair Damaged friable surfacing ACBM H. Other Significantly damaged friable surfacing material D. Encapsulate 4. Damaged/significantly damaged fnable misc. ACBM. ACBM with potential for damage ACBM with potential for significant damage NOTES *If previously assumed ACDM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 *** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 7. Any remaining friable ACBM or suspect ACBM Stepheni Perty: SIGNATURE Stepheni Pety: A-MP-47891-26076/TN Stephanie Petty **ACCREDITATION #/STATE INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty **ACCREDITATION #/STATE** SIGNATURE MANAGEMENT PLANNER

DATE: 10-15-13

LEA SYSTEM NAME: _	Chester County Schools	LEA#: 120
ADDRESS: 970 East M	ain St. Henderson, TN 38340	
		DITONIE - 521 000 5124
DESIGNATED PERSON	: Mr. Ken West	PHONE: _/31-989-5134

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
1		MANAGEMENT PLAN
-		ASBESTOS FREE MANAGEMENT PLAN
	t.	YEARLY PROGRESS REPORT
X		THREE YEAR REINSPECTION
		OTHER (Please Explain)

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: Jacks Creek Elementary **INSPECTION DATE:** 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER PAR CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT YEAR YEAR CHECK ONE YEAR YEAR TSI SURFACING X X Х Х X X X **MISCELLANEOUS** CHECK ONE ASSUMED ACBM X X X X X Х Х CONFIRMED ACBM NON-ACBM CHECK ONE X Х X X NON-FRIABLE FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) 1 DETERIORATION 1 1 1 1 PHYSICAL DAMAGE 1 1 1 1 1 1 1 1 WATER DAMAGE 2 2 2 2 **ACTIVITY/VIBRATION** 2 2 2 1 1 **EXPOSURE ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOUR/WEEK Х Х X X X 40 HOUR/WEEK X **EXPOSURE POPULATION** (CHECK ALL APPLICABLE) X X X Х X MAINTENANCE Х X X X X Х **CUSTODIAL** Х Х X Х X X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) B B В В В В B RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND Institute preventative measures E. Enclosure F. Remove G. Isolate O & M Program Damaged/significantly damaged TSI C. Repair Damaged friable surfacing ACDM Significantly damaged friable surfacing material Damaged/significantly damaged friable miss. AGBM ACBM with potential for damage H. Other D. Encapsulate NOTES *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 **If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5. 6. ACBM with potential for significant damage 7. Any remaining friable ACBM or suspect ACBM Stipheni Letz SIGNATURE Stipheni Letz A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE **INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty SIGNATURE ACCREDITATION #/STATE MANAGEMENT PLANNER

THREE YEAR REINSPECTION LEA #: 120 LEA NAME: Chester County BOE Building #: Main School Building Name: Jacks Creek Elementary **INSPECTION DATE:** 10/15/13 DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: HA NUMBER HA NUMBER HA NUMBER HA NUMBER CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY **CURRENT QUANTITY** AGRICULTURE MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT CHECK ONE YEAR YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** CHECK ONE X ASSUMED ACBM CONFIRMED ACBM NON-ACBM CHECK ONE **NON-FRIABLE** X FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) DETERIORATION 1 PHYSICAL DAMAGE 1 WATER DAMAGE 1 1 **ACTIVITY/VIBRATION EXPOSURE** 1 1 **ACCESSIBILITY** 1 LENGTH OF EXPOSURE (CHECK ONE) X Х 1 HOURWEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK **EXPOSURE POPULATION** (CHECK ALL APPLICABLE) X MAINTENANCE **CUSTODIAL** FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 7 **RESPONSE ACTIONS (MARK FROM A TO H) В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F. Remove C. Repair G. Isolate 2. Damaged friable surfacing ACBM H. Other D. Encapsulate 3. Significantly damaged friable surfacing material Damaged/significantly damaged friable misc. ACBM ACBM with potential for damage ACBM with potential for significant damage NOTES *If previously assumed ACBM was tested, attach LAHERA 6.2, TAHERA 6.3, TAHERA 6.9, and TAHERA 8.0 Any remaining friable ACBM or suspect ACBM ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5 Stiffuni letz SIGNATURE Stiffuni letz A-MP-47891-26076/TN Stephanie Petty ACCREDITATION #/STATE **INSPECTOR (Typed Name)** A-MP-47891-26076/TN Stephanie Petty **ACCREDITATION #/STATE** MANAGEMENT PLANNER

DATE: 5-6-2014

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: PO Box 327, Ho	enderson, Tennessee 38340	-
	社 衛	
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>
	· ·	5

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
		ASBESTOS FREE MANAGEMENT PLAN
X		SIX MONTH PROGRESS REPORT
		THREE YEAR REINSPECTION
		OTHER (Please Explain)

LEA N	AME: <u>CHESTER COUNTY BOE</u>		LEA NO: _	120	
CHOOL NAME:JACKS CREEK ELEMENTARY			SCHOOL	NO.: 025	
BUILD	ING NAME: <u>MAIN</u>		_,		
INSTI	RUCTIONS: AHERA regulations require a l School building containing AC Fill in the HA#, Description of the date removed in the appropr	BM must be insp ACBM, and Area	pected. Put the da Inspected. If the a the original with	te in the appropa ACBM has been your Manageme	riate column. removed put
			1st six months Date 10-15-14	2nd six months Date 5-6-14	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	(Fall) ACBM CONDITION*	(Spring) ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	N/C	
2	Floor tile	All	Good	N/C	
3	Floor tile	All	Good	N/C	
4	Floor tile	All	Good	N/C	
	2x4 Ceiling tile	All	Good	N/C	
	£				
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			ALE NO CITATION	NONDITION	DITE MO
SURVI	EILLANCE INSPECTOR'S NAME (please print):	Ken West	*IF NO CHANGE I	———	KILE N/C
SURVI (Survei	EILLANCE INSPECTOR'S SIGNATURE:	n /West			

AHERA Accreditation Number/Date (if applicable):

DATE: //-/1-2014

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: PO Box 327, Her	nderson, Tennessee 38340	RE THE SECOND SE
	¥	
0 =		
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>
	•	8

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT	
		MANAGEMENT PLAN	
*		ASBESTOS FREE MANAGEMENT PLAN	
V	•	YEARLY PROGRESS REPORT 6 m = 5	
		THREE YEAR REINSPECTION	
27		OTHER (Please Explain)	

PERIODIC SURV	EILLANCE REPORT			
LEA NAME: <u>CHES</u>	TER COUNTY BOE		LEA NO:120	a)
HOOL NAME:	JACKS CREEK ELEMENTARY	*)	SCHOOL NO.: 120-0025	•s
BUILDING NAME: _	MAIN			
•	AHERA regulations require a Periodic Su School building containing ACBM must Fill in the HA#, Description of ACBM, an the date removed in the appropriate column	be inspected. d Area Inspe	. Put the date in the appropriate collected. If the ACBM has been remove	d put

				Jet strimonties Date Nation (Rad)	2nd six mondes Date (Six ma)	
HA#	DESCRIPTION OF ACBM		AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile		All	Good	N/C	
2 .	Floor tile		All	Good	N/C	**
3	Floor tile		All	Good	N/C	
4	Floor tile	**	All	Good	N/C	
-	2x4 Ceiling tile	Ž	All	Good .	N/C	
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		(m)**	39			
		139	D			
			8			
		•97.		*IF NO CHANGE	4	

	•::	1	4			
SURVI	EILLANCE INSPECTOR'S NAME (please print):	Ken h	*IF NO CHAI	NGE IN CON	NDITION V	VRI'
SURVI		Ken Wes	<i>t</i>		120	
AHER	A Accreditation Number/Date (if applicable):	# =				
	A 0 0 (0/07)			2		

DATE: 4-7-2015

LEA SYSTEM NAME:	Chester County Schools	LEA#: 120
ADDRESS: PO Box 327, He	anderson Tennessee 38340	
ADDRESS: PO BOX 527, 110	enderson, Tennessee Socio	
¥1	320	* ,
	a a	a a
1 1 18	.6	
á	et:	
DESIGNATED PERSON:	Mr. Ken West	PHONE: <u>731-989-5134</u>
n n		%

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT	
	40 g	MANAGEMENT PLAN	
422		ASBESTOS FREE MANAGEMENT PLAN	
X	*	YEARLY PROGRESS REPORT 6 Md	
2		THREE YEAR REINSPECTION	
5		OTHER (Please Explain)	

BUILDING NAME: __MAIN____

INSTRUCTIONS: AHERA regulations require a Periodic Surveillance be conducted every six (6) months. Each School building containing ACBM must be inspected. Put the date in the appropriate column. Fill in the HA#, Description of ACBM, and Area Inspected. If the ACBM has been removed put the date removed in the appropriate column. Keep the original with your Management Plan.

			Leigh mónthe Date 11 (Dail) :	2nd sax mondis Dade ((Spring)	
НА#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	N/C	
2	Floor tile	All	Good	N/C	39
3	Floor tile	All	Good	N/C	150
4	Floor tile	All	Good	N/C	9 B 1 1 1
	2x4 Ceiling tile	All	Good	N/C	
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OI DA	EILLANCE INSPECTOR'S NAME (please print):	Ken W	*IF NO CHANGE I	N CONDITION	WRITE N/C
		n) Av	<i>L</i>		5
	EILLANCE INSPECTOR'S SIGNATURE:	den 1825			
	A Accreditation Number/Date (if applicable):	•			
AILK	A Acticulation Number/Date (it applicable).				

~AHERA 9.0 (2/97)

Deborah Gunter @tn. gow. 10/13/15 9:02an

STATE OF TENNESSEE AHERA TRANSMITTAL/SUBMITTAL FORM

DATE: 10/13/15

LEA SYSTEM NAME:	Chester County Schools		LEA#: 120	
ADDRESS: PO Box 327, F	Ienderson, Tennessee 38340			
	a			
				æ
DESIGNATED PERSON: _	Britt Eads	PHON	NE: <u>731-989-5134</u>	
			<u> </u>	c d

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT		
		MANAGEMENT PLAN		
5		ASBESTOS FREE MANAGEMENT PLAN		
X		YEARLY PROGRESS REPORT/ SIX MONTE		
		THREE YEAR REINSPECTION		
		OTHER (Please Explain)		

LEA NA	AME: <u>CHESTER COUNTY BOE</u>	<u></u> 5	LEA NO:	120	
СНОС	L NAME:JACKS CREEK ELEMENTARY		SCHOOL N	VO.: 120-0025	
BUILD	ING NAME: <u>MAIN</u>				
INSTR	EUCTIONS: AHERA regulations require a Pe School building containing ACB Fill in the HA#, Description of A the date removed in the appropria	M must be inspected CBM, and Area In	cted. Put the date nspected. If the A the original with	e in the appropri CBM has been not your Managemen	ate column.
			1st six months Date 10/9/2015 (Fall)	2nd six months Date(Spring)	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good		
2	Floor tile	All	Good		
3	Floor tile	All	Good		
4	Floor tile	All	Good		
	2x4 Ceiling tile	All	Good		***
				G	
			^		
	9				
SURVE	ILLANCE INSPECTOR'S NAME (please print): Brit ILLANCE INSPECTOR'S SIGNATURE: ance Inspector is not required to be AHERA certified)	t Eads	F NO CHANGE IN	CONDITION WR	ITE N/C
AHERA	Accreditation Number/Date (if applicable):				
TAHER	A 9.0 (2/97)				



February 24, 2016

Mr. Britt Eads Chester County Schools 970 East Main Street Henderson, Tennessee 38340 eadsb01@120cc.org (731) 433-7266

RE:

CHESTER COUNTY SCHOOLS

2016 AHERA THREE YEAR REINSPECTION REPORT

PROJECT NO. 804416

Mr. Eads:

Enclosed is the three year reinspection report for the schools inspected on February 23, 2016. Please have the school superintendent sign the Assurances Page (TAHERA 3.0).

A copy of this report has been submitted to the following address:

Tennessee Department of Education Division of Finance, Accountability and Technology Budget and Planning 6TH Floor, Andrew Johnson Tower 710 James Robertson Parkway Nashville, Tennessee 37243-0375 Attention: Deborah Boshears-Davis

Keep the original report with your management plan and submit a copy to each school under the current O & M Plan. Your next inspection (periodic surveillance inspection) will be in August 2016.

Should you have any questions or require additional information, please feel free to call my office at (615) 865-8813 or my cell at (615) 478-2463.

Sincerely,

RESOLUTION, INC.

Christopher R. Johnson, PG

Manager

Attch: 2016 AHERA Three Year Reinspection Report

Timbol L. Jell

STATE OF TENNESSEE AHERA TRANSMITTAL/SUBMITTAL FORM

DATE: February 24, 2016

LEA SYSTEM NAME:	Chester County Schools	LEA#: <u>120</u>
ADDRESS:	970 East Main Street, Henderson, TN 38340	
DESIGNATED PERSO	N: Mr. Britt Eads	PHONE: (731) 433-7266
DESIGNATED PERSO	N: Mr. Britt Eads	PHONE: (731) 433-7266

PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED BY PLACING AN "X" IN THE APPROPRIATE BOX

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
		ASBESTOS FREE MANAGEMENT PLAN
		YEARLY PROGRESS REPORT
X		THREE YEAR REINSPECTION
		OTHER (Please Explain)

ASSURANCES

SCHOOL YEAR ENDING: 2016

LEA SYSTEM NAME: Chester County Schools LEA NO.: 120

This AHERA Management Plan was developed and has been submitted pursuant to the Asbestos Hazard Emergency Response Act of 1986. Public Law 99-519; and the United States Environment Protection Agency Rule: Asbestos Containing Material in Schools; 40 CFR Part 763, Subpart E; and the undersigned does hereby certify that the Local Education Agency (LEA) indicated below has and will ensure the following:

- 1. The activities of any persons who perform inspections, re-inspections, and periodic surveillance, develop and update management plans, and develop and implement response actions, including operations and maintenance, are carried out in accordance with Part 763 and other Federal and State regulations and requirements.
- 2. All custodial and maintenance employees are properly trained as required in Part 763 and all other applicable Federal and State regulations (e.g., the Occupational Safety and Health Administration Asbestos Standard for Construction, the EPA Worker Protection Rule or applicable State regulations).
- 3. All workers and building occupants, and their legal guardians, are informed at least once each school year about inspections, response actions, and post-response action activities, including periodic re-inspection and surveillance activities, that are planned or in progress.
- 4. All short term workers (e.g., telephone repair workers, utility workers, or exterminators) who may come in contact with asbestos in a school are provided information regarding the locations of asbestos-containing materials (ACM).
- 5. All warning labels are posted in accordance with Section 763.93 (g).
- 6. All management plans are available for inspection and notification of such availability has been provided as specified in the AHERA regulations under Paragraph 763.84 (g) (2).
- 7. The undersigned person designated by the LEA pursuant to Paragraph 763.84 (g) (1) has received adequate training as stipulated in Paragraph 763.84 (g) (2).
- 8. The LEA has and will consider whether any conflict of interest may arise from the interrelationship between the Management Planner and other accredited persons performing AHERA activities.

LEA DESIGNATED PERSON (please print): Britt Eads	
LEA DESIGNATED PERSON'S SIGNATURE:	
DATE: 3/2/16	
SUPERINTENDENT (please print): TROY KILZER II	1:- ///
SUPERINTENDENT SIGNATURE:	DATE: 3/3/16
TAHERA 3.0 (2/97)	

THREE YEAR REINSPECTION LEA NAME: Chester County Schools LEA #: ____ 120 School Building Name: Chester County Middle School Building #: Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 2 3 4 CURRENT QUANTITY **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** 150 SF 1488 SF 70 SF 2960 MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** X X X Х X **CHECK ONE ASSUMED ACBM** X X X X CONFIRMED ACBM NON-ACBM CHECK ONE **NON-FRIABLE** X X X X X X X FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION 1 1 PHYSICAL DAMAGE 1 1 1 1 1 WATER DAMAGE 1 1 1 1 1 1 2 2 2 2 2 2 **ACTIVITY/VIBRATION** 2 2 **EXPOSURE** 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK 5 HOURWEEK 10 HOURWEEK 20 HOUR/WEEK 40 HOUR/WEEK X X X X **EXPOSURE POPULATION** (CHECK ALL APPLICABLE) **MAINTENANCE** Х X X X X Х X X **CUSTODIAL** x $\overline{\mathsf{x}}$ x x X X **FACULTY/STAFF PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) B В В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND Institute preventative measures E. Enclosure B. O & M Program Damaged/significantly damaged TSI F. Remove 2. Damaged frlable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA Christopher R. Johnson <u>A-I-42505-44826/TN</u>

INSPECTOR (Typed Name)

MANAGEMENT PLANNER

SIGNATURE

ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA NAME: Chester County Schools LEA #: _____ 120 Main School Building Name: Chester County Middle School Building #: DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER **HA NUMBER** HA NUMBER HA NUMBER 7B 5A 7A **CURRENT QUANTITY** CURRENT QUANTITY CURRENT QUANTITY **CURRENT QUANTITY** 5849 SF 600 LF 12832 6250 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Pipe Insulation Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI Х X SURFACING **MISCELLANEOUS** Х Х X X Х **CHECK ONE** ASSUMED ACBM Х X X X X X CONFIRMED ACBM NON-ACBM CHECK ONE X X X X X **NON-FRIABLE** X X **FRIABLE EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION 1 1 1 1 1 PHYSICAL DAMAGE 1 1 WATER DAMAGE 1 1 1 2 2 2 2 **ACTIVITY/VIBRATION** 2 2 2 2 **EXPOSURE** 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK x X 5 HOUR/WEEK 10 HOURWEEK 20 HOURWEEK Х X X X **40 HOURWEEK EXPOSURE POPULATION** (CHECK ALL APPLICABLE) MAINTENANCE X X X X X **CUSTODIAL** X X X X X X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage NOTES

6. ACBM with potential for significant damage

7. Any remaining friable ACBM or suspect ACBM

"If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3,

TAHERA 6.9 and TAHERA 8.0

** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA

Christopher R. Johnson **INSPECTOR (Typed Name)**

SIGNATURE

A-I-42505-44826/TN **ACCREDITATION #/STATE**

Christopher R. Johnson MANAGEMENT PLANNER

SIGNATURE

THREE YEAR REINSPECTION LEA NAME: Chester County Schools LEA #: 120 School Building Name: Chester County Middle School Building #: Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER

	CURRENT QUANTITY 150 SF MATERIAL DESCRIPTION Pipe Insulation		HA NUMBER 9B CURRENT QUANTITY 160 SF MATERIAL DESCRIPTION Boiler Wrap Insulation		HA NUMBER 9C CURRENT QUANTITY 120 LF MATERIAL DESCRIPTION Water Tank Insulation		HA NUI	MBER
							CURRENT QUANTITY Throughout MATERIAL DESCRIPTION 2x4 Ceiling Tile	
CHECK ONE	LAST 3 YEAR X	CURRENT	LAST 3 YEAR X	CURRENT	LAST 3 YEAR X	CURRENT	LAST 3 YEAR	CURREN
SURFACING MISCELLANEOUS	(4.5) (52) (52) II	Per met acome	ones trachansa		DESCRIPTION STORY		x	X
CHECK ONE ASSUMED ACBM CONFIRMED ACBM	X	X	X	X	X	X	X	X
NON-ACBM		ETHILD BONDANCE	KALISTA MARKANINA	Control of the contro	181425 FM - C - C			HOLD CALL WATCHES
CHECK ONE NON-FRIABLE	entrace of the part	September Of Page No.		154 1110 111 1110	100 CO (100 CO)	WHERE WE SER		SELDHER REPORT VALUE
FRIABLE	Х	X	X	X	Х	X	х	Х
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TO 5 (5 WORST)	Rechasting	MARKET WEE						
DETERIORATION	2	2	2	2	2	2	2	2
PHYSICAL DAMAGE	11	1 1	1 1	1 1	1	1	1 1	1
WATER DAMAGE ACTIVITY/VIBRATION	2	1 2	2	2	1 2	1 2	1 2	2
EXPOSURE	1	1	1	1	1	1	1	1
ACCESSIBILITY	1	 i	1 1	1	1 1	1	1 1	1
ENGTH OF EXPOSU		第18年至18月	Septimental Control		STORIES OF THE		162 St. 336	
(CHECK ONE)	医多色性 经货	海路数据						
1 HOUR/WEEK	X	X	X	X	X	X	X	X
5 HOURWEEK								
10 HOURWEEK								
20 HOUR/WEEK								
40 HOUR/WEEK	1011	The second secon	NAMES OF THE REST		SAN SECURIOR AND	2.09(2.00) in 1751, p. 186	SW - CORNER IN THE SWING	Part of the local district
XPOSURE POPULAT	ION							
MAINTENANCE	X	X	l X	X	X	X	X	X
CUSTODIAL	X	x	x	X	1 x	X	x	X
FACULTY/STAFF			1 ~		1 ~			
PUBLIC								
SSESSMENT	LEW NOTES						AND REAL PROPERTY.	15 S 10 IN
MARK FROM 1 TO 7)				大山海川				
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Damaged/significantly of Damaged friable surfactory Significantly damaged for Damaged/significantly of Damaged/significantly of Damaged/significantly of Significantly of Significant of Significantly of Significantly of Significantly of Significantly of Significantly of Significant of Significantly of Significantly of Significant	ing ACDM riable surfaci	ng material	B. O C. R D. E	& M Program	itative measur			
. ACBM with potential for								
. ACBM with potential for	significant d	amage	USSES	THE WAY	3275 9552	NOTES		
. Any remaining friable A	CBM or susp	ect ACBM	TAHE	RA 6.9 and TA	HERA 8.0	erro Torotatini pers	HERA 6.2, TAHE	2222 17

Christopher R. Johnson INSPECTOR (Typed Name)

Christopher R. Johnson MANAGEMENT PLANNER

SIGNATURE SIGNATURE

A-I-42505-44826/TN ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA #:____ 120 LEA NAME: Chester County Schools School Building Name: Chester County Middle School Building #: Cafe DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 8 **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile 2x4 Ceiling Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** Х CHECK ONE ASSUMED ACBM X X CONFIRMED ACBM NON-ACBM CHECK ONE X **NON-FRIABLE** X FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) **DETERIORATION** PHYSICAL DAMAGE 1 WATER DAMAGE 1 **ACTIVITY/VIBRATION** 3 3 1 1 **EXPOSURE** 2 2 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOUR/WEEK X X **5 HOURWEEK** 10 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK EXPOSURE POPULATION (CHECK ALL APPLICABLE) MAINTENANCE CUSTODIAL FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В В B B ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA Christopher R. Johnson A-I-42505-44826/TN INSPECTOR (Typed Name) SIGNATURE ACCREDITATION #/STATE Christopher R. Johnson A-MP-42505-44824/TN

TAHERA 16.0 (2/97)

MANAGEMENT PLANNER

SIGNATURE

ACCREDITATION #/STATE

THREE YEAR REINSPECTION **Chester County Schools** 120 LEA NAME: LEA #: ____ School Building Name: ___Chester County Middle School Building #: ___ Agri DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 10 10B 10C **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION **Boiler Jacket** Pipe Insulation Floor Tile 2x4 Ceiling Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI Х SURFACING MISCELLANEOUS **CHECK ONE** ASSUMED ACBM X CONFIRMED ACBM X X Х NON-ACBM CHECK ONE NON-FRIABLE X Х FRIABLE X Х **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) **DETERIORATION** PHYSICAL DAMAGE 1 1 1 1 1 1 1 WATER DAMAGE 1 1 1 **ACTIVITY/VIBRATION** 2 2 2 2 **EXPOSURE** 1 1 1 1 **ACCESSIBILITY** 1 LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK X X X **5 HOUR/WEEK** 10 HOUR/WEEK 20 HOURWEEK 40 HOURWEEK X X **EXPOSURE POPULATION** (CHECK ALL APPLICABLE) MAINTENANCE X X X X X X X X CUSTODIAL X X X X X X X FACULTY/STAFF X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) B В B В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA 6.5

Christopher R. Johnson INSPECTOR (Typed Name)

SIGNATURE

A-I-42505-44826/TN ACCREDITATION #/STATE

Christopher R. Johnson MANAGEMENT PLANNER A-M

A-MP-42505-44824/TN ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA NAME: Chester County Schools LEA #: 120 School Building Name: Chester County Middle School Building #: Business DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 12 **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile 2x4 Ceiling Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** X X Х Χ **CHECK ONE** ASSUMED ACBM Х CONFIRMED ACBM NON-ACBM **CHECK ONE NON-FRIABLE** X X **FRIABLE** Х **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION 1 1 PHYSICAL DAMAGE WATER DAMAGE 1 1 1 2 **ACTIVITY/VIBRATION** 2 1 1 **EXPOSURE ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X X 1 HOUR/WEEK **5 HOURWEEK** 10 HOUR/WEEK 20 HOURWEEK X **40 HOUR/WEEK EXPOSURE POPULATION** (CHECK ALL APPLICABLE) MAINTENANCE X CUSTODIAL X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) B ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND E. Enclosure Institute preventative measures B. O & M Program F. Remove 1. Damaged/significantly damaged TSI 2. Damaged frlable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA Christopher R. Johnson A-I-42505-44826/TN

INSPECTOR (Typed Name)

Christopher R. Johnson MANAGEMENT PLANNER

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ACCREDITATION #/STATE

THREE YEAR REINSPECTION 120 LEA NAME: Chester County Schools LEA #: School Building Name: Chester County Middle School Building #: Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 13B 13 **CURRENT QUANTITY CURRENT QUANTITY** CURRENT QUANTITY **CURRENT QUANTITY** MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile 2x4 Ceiling Tile Pipe Insulation LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT CHECK ONE YEAR YEAR YEAR YEAR TSI Χ X SURFACING MISCELLANEOUS X CHECK ONE ASSUMED ACBM X X CONFIRMED ACBM **NON-ACBM** CHECK ONE **NON-FRIABLE** X X X X X Х **FRIABLE EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION PHYSICAL DAMAGE 1 2 2 1 WATER DAMAGE 1 1 1 1 1 2 1 2 1 1 **ACTIVITY/VIBRATION** 1 **EXPOSURE ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X Х X X 1 HOUR/WEEK **5 HOUR/WEEK** 10 HOUR/WEEK 20 HOURWEEK X **40 HOUR/WEEK EXPOSURE POPULATION** (CHECK ALL APPLICABLE) MAINTENANCE X X X X **CUSTODIAL** $\overline{\mathsf{x}}$ FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В В B ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND Institute preventative measures E. Enclosure B. O & M Program F. Remove Damaged/significantly damaged TSI 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA A-I-42505-44826/TN Christopher R. Johnson

INSPECTOR (Typed Name)

MANAGEMENT PLANNER

SIGNATURE

ACCREDITATION #/STATE

Christopher R. Johnson SIGNATURE

THREE YEAR REINSPECTION LEA NAME: Chester County Schools LEA #: 120 School Building Name: West Chester Elementary School Building #: Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16

	CURRENT QUANTITY 1770 SF MATERIAL DESCRIPTION Floor Tile			HA NUMBER 2		HA NUMBER 3		MBER
			CURRENT QUANTITY 2140 SF MATERIAL DESCRIPTION Floor Tile		CURRENT QUANTITY 5603 SF MATERIAL DESCRIPTION Floor Tile		CURRENT QUANTITY 6240 SF MATERIAL DESCRIPTION Floor Tile	
CHECK ONE	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT
SURFACING MISCELLANEOUS CHECK ONE	X	x	x	X	x	X	x	X
ASSUMED ACBM CONFIRMED ACBM NON-ACBM	X	X	X	X	X	X	X	X
CHECK ONE NON-FRIABLE	X	x	X	X	X	X		
FRIABLE EXPOSURE CONSIDE 1 TO 5 (5 WORST)	RATION		l				X	l X
DETERIORATION PHYSICAL DAMAGE	1	1	1 1	1	1	1	1 1	1
WATER DAMAGE ACTIVITY/VIBRATION EXPOSURE	1 2 1	2	1 2	2	2	1 2 1	2	1 2 1
ACCESSIBILITY LENGTH OF EXPOSU	1	1	1	1	1	1	1	1
(CHECK ONE) 1 HOURWEEK 5 HOURWEEK 10 HOURWEEK			SEARCH W/275550F3	55 44250000			Albanya is distributed by	
20 HOUR/WEEK 40 HOUR/WEEK	х	X	X	x	X	X	x	X
EXPOSURE POPULAT (CHECK ALL APPLICABLE)								
MAINTENANCE CUSTODIAL FACULTY/STAFF	X X X	X	X	X	X	X	X	X
PUBLIC ASSESSMENT	X	X	X	l x	X	X	X	X
(MARK FROM 1 TO 7)	5	5	5	5	5	5	5	5
**RESPONSE ACTION (MARK FROM A TO H)			T 6	T p		Гъ		
ASSESSM	B ENT/LEGEN	В О	В	B	RESPONS	E ACTIONS	B LEGEND	B DEAL DEAL DEAL DISC
Damaged/significantly Damaged friable surfact Significantly damaged Damaged/significantly ACBM with potential for	cing ACBM friable surfaci damaged frial	ng material	B. C C. R D. E	estitute prever & M Progran epair ncapsulate	ntative measur			
ACBM with potential for Any remaining friable A	r significant d		TAHE	RA 6.9 and TA	HERA 8.0		HERA 6.2, TAHE vised TAHERA 6.	•

Christopher R. Johnson INSPECTOR (Typed Name)

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A-I-42505-44826/TN

Christopher R. Johnson MANAGEMENT PLANNER

THREE YEAR REINSPECTION 120 LEA #: LEA NAME: Chester County Schools School Building Name: West Chester Elementary School Building #: _ Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 6 CURRENT QUANTITY **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** 30,000 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION 2x4 Ceiling Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** Х X Х CHECK ONE **ASSUMED ACBM** Х **CONFIRMED ACBM NON-ACBM** CHECK ONE X X **NON-FRIABLE** X FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION 1 1 PHYSICAL DAMAGE WATER DAMAGE 1 1 2 1 **ACTIVITY/VIBRATION** 2 1 **EXPOSURE** 2 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) X 1 HOURWEEK X **5 HOURWEEK** 10 HOUR/WEEK 20 HOURWEEK X **40 HOUR/WEEK EXPOSURE POPULATION** (CHECK ALL APPLICABLE) **MAINTENANCE** X X **CUSTODIAL** X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) B ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND Institute preventative measures E. Enclosure B. O & M Program F. Remove Damaged/significantly damaged TSI 2. Damaged friable surfacing ACBM C. Repair G. Isolale 3. Significantly damaged friable surfacing material H. Other D. Encapsulate 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage NOTES 6. ACBM with potential for significant damage 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA A-I-42505-44826/TN Christopher R. Johnson SIGNATURE ACCREDITATION #/STATE INSPECTOR (Typed Name)

Christopher R. Johnson MANAGEMENT PLANNER

A-MP-42505-44824/TN ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA NAME: __ **Chester County Schools** 120 LEA #:____ School Building Name: North Chester Elementary School Building #: __ Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 5 **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** CURRENT QUANTITY 3904 SF 200 SF 4768 MATERIAL DESCRIPTION | MATERIAL DESCRIPTION | MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** Х X X Х X CHECK ONE ASSUMED ACBM **CONFIRMED ACBM** X Χ X Х х X X **NON-ACBM** CHECK ONE NON-FRIABLE X X Х Χ Х FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) **DETERIORATION** PHYSICAL DAMAGE 1 1 1 1 1 WATER DAMAGE 1 1 1 1 1 1 **ACTIVITY/VIBRATION** 2 2 2 2 2 2 2 **EXPOSURE** 1 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOUR/WEEK 40 HOUR/WEEK Х X X X X X X **EXPOSURE POPULATION** (CHECK ALL APPLICABLE) MAINTENANCE X X X X CUSTODIAL X X X X X X X X FACULTY/STAFF X X X Х X X X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В B B B В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA

Christopher R. Johnson INSPECTOR (Typed Name)

MANAGEMENT PLANNER

Christopher R. Johnson

SIGNATURE

A-I-42505-44826/TN ACCREDITATION #/STATE

SIGNATURE

THREE YEAR REINSPECTION LEA #: _____120 LEA NAME: Chester County Schools School Building Name: North Chester Elementary School Building #: Main

DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16

	HA NUMBER 6 CURRENT QUANTITY 1870 SF			HA NUMBER 7		HA NUMBER 8		MBER
			CURRENT QUANTITY 6669 SF		CURRENT QUANTITY 864		CURRENT QUANTITY Throughout	
		ESCRIPTION r Tile	ION MATERIAL DESCRIPTION Floor Tile		MATERIAL DESCRIPTION Floor Tile		MATERIAL DESCRIPTION 2x4 Ceiling Tile	
CHECK ONE	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURREN
TSI			ĺ					
SURFACING								
MISCELLANEOUS	Х	X	X	X	X	X	Х	X
CHECK ONE		And the latest the	itezaty na	· 图1000000000000000000000000000000000000	BEET WEST STATE		SESSION OF S	对加度设置的
ASSUMED ACBM	POTENCIA SINCE AND	Territory Charles of American	TANK DE COMMUNICATION	1	I		l x	X
CONFIRMED ACBM	X	X	Х	X	Х	X	_^_	, , , , , , , , , , , , , , , , , , ,
NON-ACBM			1		<u> </u>	<u> </u>		
CHECK ONE	9787.6X3.1379.5	SCHOOL SECTION			E0010000000000000000000000000000000000	SEPTEMBER OF STREET	WEST BUILDING	GERRAL STATE
NON-FRIABLE	X	X	X	T x	X	X	en 4000 ne 4202 22	AND DESCRIPTION OF THE PARTY OF
FRIABLE		_ ^	- ^-	_ ^	- ^-	 ^ -	Х	X
and the second s	DATION	PHENDROPPART	E MARGINISH PARTY	zioemas neim	Dezas version con seco	A CHARLES	APPROXIMENT IN	HICKNESS CO.
EXPOSURE CONSIDE 1 TO 5 (5 WORST)	KATION							
DETERIORATION	AND THE PERSON	1	1	1	days of state of the state of	I 1	A PARTY OF THE PAR	1
PHYSICAL DAMAGE	1	i	+ +	1 1	1 1	1 1	1	1
WATER DAMAGE	1	1	1	1	1	1	1	1
	2	2	2	2	2	2	1 1	1
ACTIVITY/VIBRATION			1	1	1			1
EXPOSURE	1	1 1	+++	++	1	1 1	1 1	-
ACCESSIBILITY		VINERAL CHICANAGA	(1802-00-rectar	po ARC Keelingradii	STATUTE STEELING VI	Parally hartest a process	SWIND COMPLETE SECO	OPTOMORROSHED BY
ENGTH OF EXPOSU	XE.					4. 2 - In Market		
(CHECK ONE) 1 HOUR/WEEK	A DESCRIPTION OF THE PERSON	SCHOOL STATE	STENDAR WINDS TO W	SOCIAL SINGS	The state of the s	CEASING CONTRACTOR	X	X
							^	_^_
5 HOURWEEK			 		-			
10 HOURWEEK					 			-
20 HOURWEEK	Х	Х	х	X	Х	X		
40 HOURWEEK		STORAGE STATE STATE	Angel Market	CLOURS SERVICE MATERIAL	SCHOOL SHOP SO	out on Casalin	CREPATE WEATHER WA	Over the series
XPOSURE POPULAT	ION							
CHECK ALL APPLICABLE) MAINTENANCE	X	X	X	X	X	X	X	X
CUSTODIAL	x	X	X	X	x	X	x	x
	x	X	X	X	X	x	_^_	_^
FACULTY/STAFF PUBLIC	x	X	x	x	x	x		
ASSESSMENT	SHARING SALES COSE	CAPTER STATE OF THE STATE OF TH	CALE TRANSPORTED	Market State Front	MODEL OF THE STATE OF	LACK SCHOOLSTERNS	COST CONTRACTOR	SENSEL ECHNES
and applications the part of the property of the part							1000	
MARK FROM 1 TO 7)	5	5	5	5	5	5	7	7
		3	3	3	S THE RESERVE OF THE PARTY OF T	3	edinarduena arretear	
*RESPONSE ACTION	S				ALL DE C			
MARK FROM A TO H)		BOULD MADE		和作品的是透過	SHEEST TO SHOW	70年1月日本	RESERVE SERVE	CHEMICAL STREET
	В	В	В	В	В	В	В	В
ASSESSM	ENT LEGENI		是是自己的信息			E ACTIONS L		
Damaged/significantly of Damaged friable surfacts Significantly damaged Damaged/significantly of	cing ACBM friable surfaci damaged friat	ng material	B. C C. R D. E	estitute preven & M Program Lepair Incapsulate	tative measur			
 ACBM with potential for ACBM with potential for 	r damage	amaga	The same same	north white	Port Wallie	NOTES	STORY VALUE	Service of the servic
			+15	wiously seems	d ACRM was to	NOTES	JEDA 62 TAUE	DA 6.3
7. Any remaining friable A	CRINI OL SRSD	ect ACBIVI	TAHE	RA 6.9 and TAI	HERA 8.0	-	HERA 6.2, TAHE ised TAHERA 6.4	

INSPECTOR (Typed Name)

SIGNATURE

ACCREDITATION #/STATE

Christopher R. Johnson MANAGEMENT PLANNER SIGNATURE

THREE YEAR REINSPECTION 120 **Chester County Schools** LEA #: ____ LEA NAME: School Building Name: <u>East Chester Elementary School</u> Building #: _ Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 1 2 3 **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** 7204 SF 3915 SF 576 SF 1192 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR TSI SURFACING MISCELLANEOUS X X X Х X X X CHECK ONE ASSUMED ACBM CONFIRMED ACBM X X X X X Х Χ Х **NON-ACBM** CHECK ONE NON-FRIABLE FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) **DETERIORATION** PHYSICAL DAMAGE 1 WATER DAMAGE 1 1 1 **ACTIVITY/VIBRATION** 2 2 2 2 2 2 2 2 **EXPOSURE** 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK 5 HOURWEEK 10 HOURWEEK 20 HOURWEEK **40 HOURWEEK** EXPOSURE POPULATION (CHECK ALL APPLICABLE) MAINTENANCE X **CUSTODIAL** X X X X X Х X X FACULTY/STAFF X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В В В В В B В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material H. Other D. Encapsulate 4. Damaged/significantly damaged friable misc. ACBM

- 5. ACBM with potential for damage
- 6. ACBM with potential for significant damage
- 7. Any remaining friable ACBM or suspect ACBM

NOTES

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Christopher R. Johnson INSPECTOR (Typed Name)

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THREE YEAR REINSPECTION LEA #: ____ 120 LEA NAME: **Chester County Schools** School Building Name: <u>East Chester Elementary School</u> Building #: ____ Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 5 6 7 **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** 11417 SE 10070 SF 1544 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI **SURFACING MISCELLANEOUS** Χ CHECK ONE ASSUMED ACBM CONFIRMED ACBM Х Х Х X Х X Х Х NON-ACBM CHECK ONE **NON-FRIABLE** Х FRIABLE EXPOSURE CONSIDERATION 1 TO 5 (5 WORST) **DETERIORATION** 1 1 1 PHYSICAL DAMAGE 1 1 WATER DAMAGE 1 1 1 2 2 2 2 2 2 2 2 **ACTIVITY/VIBRATION EXPOSURE** 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK **5 HOURWEEK** 10 HOUR/WEEK 20 HOUR/WEEK **40 HOURWEEK** X **EXPOSURE POPULATION** (CHECK ALL APPLICABLE) MAINTENANCE Х **CUSTODIAL** Х X X X X Х х X x $\overline{\mathsf{x}}$ X X X FACULTY/STAFF X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure B. O & M Program 1. Damaged/significantly damaged TSI F. Remove 2. Damaged friable curfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM

- 5. ACBM with potential for damage
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- 7. Any remaining friable ACBM or suspect ACBM

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A-I-42505-44826/TN ACCREDITATION #/STATE

> A-MP-42505-44824/TN ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA #: ____ LEA NAME: **Chester County Schools** 120 School Building Name: <u>East Chester Elementary School</u> Building #: _____Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** 52000 SF 960 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION | MATERIAL DESCRIPTION 2x4 Ceiling Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CHRRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** х X X CHECK ONE **ASSUMED ACBM** Х CONFIRMED ACBM Х Х NON-ACBM CHECK ONE **NON-FRIABLE** X FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION PHYSICAL DAMAGE 1 WATER DAMAGE 2 2 1 **ACTIVITY/VIBRATION** 1 **EXPOSURE** 2 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK 5 HOURWEEK 10 HOUR/WEEK 20 HOURWEEK 40 HOUR/WEEK X **EXPOSURE POPULATION** (CHECK ALL APPLICABLE) MAINTENANCE X CUSTODIAL х X Х Х X Х FACULTY/STAFF X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 **RESPONSE ACTIONS (MARK FROM A TO H) В RESPONSE ACTIONS LEGEND ASSESSMENT LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA SIGNATURE Christopher R. Johnson A-I-42505-44826/TN **INSPECTOR (Typed Name) ACCREDITATION #/STATE**

Christopher R. Johnson MANAGEMENT PLANNER

A-MP-42505-44824/TN ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA NAME: Chester County Schools LEA #: _____120 <u>Main</u> Building #: ____ DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 1 3 **CURRENT QUANTITY** CURRENT QUANTITY **CURRENT QUANTITY CURRENT QUANTITY** 6401 SF 42 SF 959 SF 1512 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR YEAR TSI **SURFACING** Х Х Х **MISCELLANEOUS** X **CHECK ONE** ASSUMED ACBM CONFIRMED ACBM Х X X X X X Х Х **NON-ACBM** CHECK ONE NON-FRIABLE FRIABLE X **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION 1 PHYSICAL DAMAGE WATER DAMAGE 1 1 1 1 **ACTIVITY/VIBRATION** 2 2 2 2 2 2 2 2 **EXPOSURE** 1 1 **ACCESSIBILITY** LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK **5 HOURWEEK** 10 HOUR/WEEK 20 HOURWEEK **40 HOUR/WEEK EXPOSURE POPULATION** (CHECK ALL APPLICABLE) **MAINTENANCE** X X Х X X CUSTODIAL X Χ Х X X Х X X FACULTY/STAFF X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 **RESPONSE ACTIONS (MARK FROM A TO H) В В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure B. O & M Program 1. Damaged/significantly damaged TSI F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate

- 3. Significantly damaged friable surfacing material
- Damaged/significantly damaged friable misc. ACBM
- 5. ACBM with potential for damage
- 6. ACBM with potential for significant damage
- 7. Any remaining friable ACBM or suspect ACBM
- D. Encapsulate

H. Other

NOTES

*If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0

** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA

Christopher R. Johnson

INSPECTOR (Typed Name)

Christopher R. Johnson MANAGEMENT PLANNER

SIGNATURE

A-I-42505-44826/TN ACCREDITATION #/STATE

A-MP-42505-44824/TN ACCREDITATION #/STATE

		THR	EE YEAR R	EINSPECTI	ON			
LEA NAME:Cheste	er County S	chools		LE	A #:	120		
School Building Name:	Jacks C	reek Eleme	ntary Schoo	ol Bui	ilding #:	Main		
DATE OF IMPLEMENT	ATION OF N	MANAGEME	NT PLAN:	7/9/89 INS	SPECTION [DATE: <u>2/23/</u>	<u>16</u>	
	HA NU	JMBER	HA NU	MBER		IMBER	HA NU	MBER
		QUANTITY 00 SF	CURRENT	QUANTITY	CURRENT	QUANTITY	CURRENT C	UANTITY
		ESCRIPTION iling Tile	MATERIAL D	ESCRIPTION	MATERIAL D	ESCRIPTION	MATERIAL DE	SCRIPTION
CHECK ONE	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT	LAST 3 YEAR	CURRENT
SURFACING MISCELLANEOUS CHECK ONE	X	X	SEZÄYTE SHE		Anni di Santa		Shirter Parketti eta e	
ASSUMED ACBM CONFIRMED ACBM NON-ACBM	X	X			ETROPEO EN POR			Name and Additional Property of the Control of the
CHECK ONE NON-FRIABLE		X					\$6.00 to 10.00	
FRIABLE EXPOSURE CONSIDE 1 TO 5 (5 WORST)								
DETERIORATION PHYSICAL DAMAGE WATER DAMAGE	1	1 1						
ACTIVITY/VIBRATION EXPOSURE ACCESSIBILITY	1 1	1 1 1						
(CHECK ONE)								
1 HOURWEEK 5 HOURWEEK 10 HOURWEEK	X	X						
20 HOUR/WEEK 40 HOUR/WEEK EXPOSURE POPULAT (CHECK ALL APPLICABLE)	TON							
MAINTENANCE CUSTODIAL FACULTY/STAFF	X	X	THE SECOND SECOND		\$415.00 TEST## 100			
PUBLIC ASSESSMENT (MARK FROM 1 TO 7)				(1)				
**RESPONSE ACTION (MARK FROM A TO H)	7 S	7						
§	В	В	6 Ann 1728 De	HINGTON CONTROLLED		SERVICE CONTRACTOR		
ASSESSM	ENT LEGENE	基制的标题	A. In	stitute prevent		EACTIONS L es E. En	EGEND closure	
Damaged/significantly of 2. Damaged friable surfactions 3. Significantly damaged full damaged full damaged full barnaged/significantly of 5. ACBM with potential for	ing ACBM riable surfacir damaged friab damage	le misc. ACB	B. O C. R D. E	& M Program		F. Re G. Iso H. Ot	move plate	
6. ACBM with potential for significant damage 7. Any remaining friable ACBM or suspect ACBM				*If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHER 6.5				
Christopher R. John INSPECTOR (Typed Name)		Chi	SIGNATURE	LR.C	John		5 <mark>05-44826/TI</mark> TATION #/STA	
Christopher R. John		1	1	160	0.0			
MANAGEMENT PLANNER	13011		SIGNATURE		1		<mark>12505-44824</mark> TATION #/STA	

THREE YEAR REINSPECTION 120 LEA NAME: __ Chester County Schools LEA #: _____ School Building Name: Chester County Jr. High School Building #: ___ Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 HA NUMBER HA NUMBER HA NUMBER HA NUMBER 1 2 4 **CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY CURRENT QUANTITY** 1800 SF 212 SF 3066 SF 5124 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile Floor Tile Floor Tile Floor Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR TSI **SURFACING MISCELLANEOUS** Х Х Х Х Х **CHECK ONE** ASSUMED ACBM X X X X X X Х CONFIRMED ACBM NON-ACBM CHECK ONE **NON-FRIABLE** X **FRIABLE EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) DETERIORATION PHYSICAL DAMAGE 1 WATER DAMAGE **ACTIVITY/VIBRATION** 2 2 2 2 2 2 2 2 **EXPOSURE** 1 ACCESSIBILITY LENGTH OF EXPOSURE (CHECK ONE) 1 HOURWEEK **5 HOUR/WEEK** 10 HOUR/WEEK 20 HOURWEEK **40 HOURWEEK** X EXPOSURE POPULATION (CHECK ALL APPLICABLE) MAINTENANCE X Х X CUSTODIAL Х X Х х X FACULTY/STAFF X X **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) 5 5 5 5 5 **RESPONSE ACTIONS (MARK FROM A TO H) В ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure 1. Damaged/significantly damaged TSI B. O & M Program F. Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate D. Encapsulate 3. Significantly damaged friable surfacing material H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3, TAHERA 6.9 and TAHERA 8.0 ** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA

Christopher R. Johnson

INSPECTOR (Typed Name)

Christopher R. Johnson MANAGEMENT PLANNER SIGNATURE

A-I-42505-44826/TN

ACCREDITATION #/STATE

A-MP-42505-44824/TN ACCREDITATION #/STATE

THREE YEAR REINSPECTION LEA #: _____120 LEA NAME: Chester County Schools School Building Name: Chester County Jr. High School Building #: ____ Main DATE OF IMPLEMENTATION OF MANAGEMENT PLAN: 7/9/89 INSPECTION DATE: 2/23/16 **HA NUMBER** HA NUMBER HA NUMBER HA NUMBER 7 **CURRENT QUANTITY** CURRENT QUANTITY **CURRENT QUANTITY CURRENT QUANTITY** 164 SF 70000 SF MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION MATERIAL DESCRIPTION Floor Tile 2x4 Ceiling Tile LAST 3 LAST 3 LAST 3 LAST 3 CURRENT CURRENT CURRENT CURRENT **CHECK ONE** YEAR YEAR YEAR TSI SURFACING **MISCELLANEOUS** Х X X Х CHECK ONE ASSUMED ACBM X Х Х Х **CONFIRMED ACBM** NON-ACBM CHECK ONE **NON-FRIABLE** FRIABLE **EXPOSURE CONSIDERATION** 1 TO 5 (5 WORST) **DETERIORATION** PHYSICAL DAMAGE 1 WATER DAMAGE **ACTIVITY/VIBRATION** 2 2 2 2 **EXPOSURE** 1 1 ACCESSIBILITY 1 LENGTH OF EXPOSURE (CHECK ONE) X Х 1 HOURWEEK 5 HOURWEEK 10 HOURWEEK 20 HOUR/WEEK **40 HOURWEEK** EXPOSURE POPULATION (CHECK ALL APPLICABLE) **MAINTENANCE** X X CUSTODIAL Х X X FACULTY/STAFF **PUBLIC** ASSESSMENT (MARK FROM 1 TO 7) **RESPONSE ACTIONS (MARK FROM A TO H) ASSESSMENT LEGEND RESPONSE ACTIONS LEGEND A. Institute preventative measures E. Enclosure B. O & M Program 1. Damaged/significantly damaged TSI F Remove 2. Damaged friable surfacing ACBM C. Repair G. Isolate 3. Significantly damaged friable surfacing material D. Encapsulate H. Other 4. Damaged/significantly damaged friable misc. ACBM 5. ACBM with potential for damage 6. ACBM with potential for significant damage NOTES 7. Any remaining friable ACBM or suspect ACBM *If previously assumed ACBM was tested, attach TAHERA 6.2, TAHERA 6.3,

TAHERA 6.9 and TAHERA 8.0

** If "current" is different from "last 3 year", attach revised TAHERA 6.4 and TAHERA

Christopher R. Johnson **INSPECTOR (Typed Name)**

MANAGEMENT PLANNER

Christopher R. Johnson

SIGNATURE

A-I-42505-44826/TN ACCREDITATION #/STATE

SIGNATURE



THE STATE OF TENNESSEE

Department of Environment and Conservation Division of Solid Waste Management Toxic Substances Program

William R. Snodgrass Tennessee Tower 312 Rosa L. Parks Avenue, 14th Floor Nashville TN 37243

By virtue of the authority vested by the Division of Solid Waste Management, the Company named below is hereby accreditted to offer and/or conduct Asbestos activities pursuant to Rule 1200-01-20:

Resolution Incorporated

1101-A Darbytown Dr. Nashville TN, 37207

to conduct ASBESTOS ACTIVITIES in schools or public and commercial buildings in Tennessee. This firm is responsible for compliance with the applicable requirements of Rule 1200-01-20.

Discipline	Туре	Accreditation Number	Effective Date	Expiration Date	
Accreditation	Re-Accreditation	A-F-690-46059	December 01, 2015	December 31, 2016	1



Given under the Seal of the State of Tennessee in Nashville.

This 18th Day of December 2015

Division of Solid Waste Management Toxic Substance Program

CN-1324 (Rev 6/13)

RDA-3020

THE STATE OF TENNESSEE

Department of Environment and Consorvation Division of Solid Waste Management

Toxic Substances Program

The statement of

WGT 185 Christopher R. Johnson 5.9"

DOB 30-Nov-1961

A-MP-42505-44824 A-1-42505-44826 Accreditation

Management Planner

Discipline Inspector Project Designer

Project Monitor

Oct-31-2016

Oct-31-2016 Expiration

Oct-31-2016 Oct-31-2016

A-PD-42505-44825

A PM-42505-44823

Asbestos Accreditation

Re-Accreditation

	ME: CHESTER COUNTY BOE		LEA NO:	120	
	L NAME:JACKS CREEK ELEMENTARY	 ×	-	NO.: 120-0025	
	NG NAME: MAIN				
			ť		
INSTR	UCTIONS: AHERA regulations require a School building containing AC Fill in the HA#, Description of the date removed in the appropr	BM must be inspea ACBM, and Area	ected. Put the date Inspected. If the A the original with	e in the appropri CBM has been r your Managemen	ate column. emoved put
			1st six months Date 8/22/2016	2nd six months Date	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	(Fall) ACBM CONDITION*	(Spring) ACBM CONDITION*	DATE REMOVED
L	Floor tile	All	Good		
2	Floor tile	All	Good		
3	Floor tile	All	Good		
4	Floor tile	Ali	Good		
	2x4 Ceiling tile	All	Good		
	·				
	*				
			¥		
SURVEI	LLANCE INSPECTOR'S NAME (please print). B LLANCE INSPECTOR'S SIGNATURE:	ritt Eads	FIF NO CHANGE IN	CONDITION WE	RITE N/C

AHERA Accreditation Number/Date (if applicable):

^TAHERA 9.0 (2/97)

TAHERA 9.0 (2/97)

LCANA	ME. QUESTER COLDITY DOE		151,00	400	
LEA NA	AME: <u>CHESTER COUNTY BOE</u>	LEA NO: _	120		
3CHOO	L NAME:JACKS CREEK ELEMENTAF	RY	SCHOOL 1	NO.: <u>120-0025</u>	
BUILDI	NG NAME: <u>MAIN</u>		=		
INSTR	UCTIONS: AHERA regulations require School building containing Fill in the HA#, Description the date removed in the app	g ACBM must be insp n of ACBM, and Area	ected. Put the dat Inspected. If the A the original with	e in the appropri	ate column. removed put
			1st six months Date 8/22/2016 (Fall)	2nd six months Date <u>2/9/2017</u>	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	Good	
2	Floor tile	All	Good	Good	
3	Floor tile	All	Good	Good	
4	Floor tile	Ali	Good	Good	
	2x4 Ceiling tile	All	Good	Good	
		1			
SURVEI (Surveill	ILLANCE INSPECTOR'S NAME (please printLLANCE INSPECTOR'S SIGNATURE:ance Inspector is not required to be AHERA c Accreditation Number/Date (if applicable):	nt): Britt Eads Associated Signal Si	*IF NO CHANGE IN	CONDITION WE	RITE N/C

TAHERA 9.0 (2/97)

.74 . N/A VIII.	CHESTER COUNTY BOE		LEA NO:	120	
HOOL NA	ME:JACKS CREEK ELEMENTAR	Y	SCHOOL N	O.: <u>120-0025</u>	et= 3 = 5
ALDING N	NAME: MAIN				
.STRLC	HO's: AHERA regulations require School building containing Fill in the HA. De cription upgable removed in the app	ACBM most be in po	reted. Put the data Inspected. If the N	om the appropriate (CBM has been a	alen Upi kulifik
	Transfer ver mile age		Date <u>8/9/2017</u>	Date	,
HA# DE	SCRIPTION OF ACBM	AREA INSPECTED	(Fall) ACBM CONDITION*	(Spring) ACBM CONDITION*	DATE REMOVE
1 Floo	or tile	All	Good		
2 Flo	or tile	All	Good		
3 610	or tile	All	Good		
	or tile	All	Good		
2x4	4 Ceiling tile	All	Good		
			"IL ZOCHANGI 1		

LEA NAME: CHESTER COUNTY BOE

LEA NO:

120

SCHOOL NAME: __JACKS CREEK ELEMENTARY

SCHOOL NO.

120-0025

BUILDING NAME: MAIN

INSTRUCTIONS: AHERA regulations require a Periodic Surveillance be conducted every six (6) months. Tach School building containing ACBM must be inspected. Put the date in the appropriate column Fill in the UA. Description of ACBM, and Area Inspected. If the ACBM has been removed put the date removed in the appropriate column. Keep the original with your Management Plan.

AREA INSPECTED All	ACBM CONDITION*	ACBM	
All		CONDITION*	DATE REMOVED
	Good	Good	
All	Good	Good	
			
			—u—————

*11	NO	CHA	NGF	IN	C	(1)	(I)	I	К	N	WRI	FE:	N	C	

SURVEILLANCE INSPECTOR'S NAME (please print): Britt Eads	i.
SURVEILLANCE INSPECTOR'S SIGNATURE: (Surveillance Inspector is not required to be AHERA certified)	
AHERA Accreditation Number/Date (if applicable):	
TAHERA 9.0 (2/97)	

LEA NA	AME: <u>CHESTER COUNTY BOE</u>		LEA NO:	120	
сноо	L NAME:JACKS CREEK ELEMENTA	ARY	SCHOOL N	NO.: <u>120-0025</u>	
BUILDI	NG NAME: <u>MAIN</u>		= a		
INSTR	UCTIONS: AHERA regulations requestions of School building containing Fill in the HA#, Descript the date removed in the a	ng ACBM must be insp ion of ACBM, and Area	ected. Put the date Inspected. If the A the original with	e in the appropri CBM has been i your Managemer	ate column. removed put
			1st six months Date 8/6/2018 (Fall)	2nd six months Date (Spring)	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good		
2	Floor tile	All	Good	12	
3	Floor tile	All	Good		
4	Floor tile	All	Good		
	2x4 Ceiling tile	All	Good		
: 					
				8	
URVEI	LLANCE INSPECTOR'S NAME (please p LLANCE INSPECTOR'S SIGNATURE: _ ance Inspector is not required to be AHERA	rint): Britt Eads	*IF NO CHANGE IN	CONDITION WE	RITE N/C

AHERA Accreditation Number/Date (if applicable):

~4HERA 9.0 (2/97)

A AJACA	ODIO DOLL I SELECTION OF THE PROPERTY OF THE P				
LEA NA	AME:CHESTER COUNTY BOE		LEA NO:	120	
3CHOO	L NAME:JACKS CREEK ELEMENTAF	RY	SCHOOL N	NO.: <u>120-0025</u>	
BUILDI	ING NAME: <u>MAIN</u>		e e		
INSTR	RUCTIONS: AHERA regulations requires School building containing Fill in the HA#, Description the date removed in the app	g ACBM must be inspendently of ACBM, and Area I	ected. Put the date Inspected. If the A	e in the appropri CBM has been i your Managemer	iate column. removed put
			1st six months Date 8/6/2018 (Fall)	2nd six months Date 2/13/2019	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	Good	
2	Floor tile	All	Good	Good	
3	Floor tile	All	Good	Good	
4	Floor tile	All	Good	Good	
	2x4 Ceiling tile	All	Good	Good	
	VI				
					l r
SURVE	ILLANCE INSPECTOR'S NAME (please pri		FIF NO CHANGE IN	N CONDITION WI	RITE N/C
SURVE (Surveil	ILLANCE INSPECTOR'S SIGNATURE:lance Inspector is not required to be AHERA c	ertified)			
AHERA	Accreditation Number/Date (if applicable):				

~4HERA 9.0 (2/97)

LEA NA	ME:CHESTER COUNTY BOE		LEA NO:	120	
SCHOO	L NAME:JACKS CREEK ELEMENTA	ARY	SCHOOL N	NO.: <u>120-0025</u>	
BUILDI	NG NAME: <u>MAIN</u>		-		
INSTR	UCTIONS: AHERA regulations requ School building containi Fill in the HA#, Descript the date removed in the a	ng ACBM must be insp ion of ACBM, and Area	ected. Put the date Inspected. If the A the original with	e in the appropri CBM has been i your Man <mark>ageme</mark> r	ate column. removed put
			1st six months Date 8/8/2018 (Fall)	2nd six months Date (Spring)	
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
Ī	Floor tile	Ali	Good	Good	
2	Floor tile	All	Good	Good	
3	Floor tile	All	Good	Good	
4	Floor tile	All	Good	Good	
	2x4 Ceiling tile	All	Good	Good	
SURVEI	LLANCE INSPECTOR'S NAME (please p LLANCE INSPECTOR'S SIGNATURE: _ ance Inspector is not required to be AHERA	rint): Britt Eads	*IF NO CHANGE IN	CONDITION WI	RITE N/C

AHERA Accreditation Number/Date (if applicable):

TAHERA 9.0 (2/97)



January 21, 2020

Mr. Britt Eads Chester County Schools 970 East Main Street Henderson, Tennessee 38340 Eadsb01@120cc.org (731) 433-7266

RE:

PCM CLEARANCE RESULTS 65 TN-22 ALTERNATE

JACKS CREEK, TENNESSEE 38347

PROJECT NO. 159719

Mr. Eads:

Resolution, Inc. has completed the asbestos air testing regarding the above referenced project. All testing was performed by Mr. Dominic Motes an Asbestos Hazard Emergency Response Act (AHERA) and State of Tennessee accredited project monitor.

A total of nine (9) air samples were collected from one (1) regulated work areas. Samples were collected using precalibrated high-volume pumps according to EPA and NIOSH air sampling protocols. All samples were analyzed using Phase Contrast Microscopy (PCM) according to the National Institute for Occupational Safety and Health (NIOSH) Method 7400. The following table is a summary of the analytical results.

SUMMARY OF AHERA PCM CLEARANCE RESULTS

Sample No.	Sample Type	Sample Location	Volume (L)	Result (f/cc)	Pass/Fail
1	In Area	In Kitchen, ADJ to doorway	300	0.0065	Pass
2	In Area	In Kitchen, ADJ to sink	300	0.0049	Pass
3	Outside Area	In Kitchen, ADJ to fridge	300	0.0033	Pass
4	Clearance	North Wall in containment	1260	0.0023	Pass
5	Clearance	South Wall in containment	1260	0.0027	Pass
6	Clearance	East Wall in containment	1260	0.0027	Pass
7	Clearance	West Wall containment	1260	0.0031	Pass
8	Clearance	Center of Containment	1260	0.0023	Pass
9	Clearance	Field Blank	0	0.0065	Pass

From the analytical, all clearance results are below the AHERA PCM clearance level of <0.01 fibers per cubic centimeter (f/cc). The work areas are cleared for re-occupancy.

Should you have any questions or require additional information, please feel free to call my office at (615) 865-8813 or my cell at (410) 725-2302.

Sincerely,

RESOLUTION, INC.

Dominic Motes, Field Technician Hygienist.

Attch:

Analytical Report Sheets

Accreditations

Resolution, Inc. 1101A Darbytown Drive Nashville, Tennessee 37207 Phone (615) 865-8813 Fax (615) 868-4140 www.resolutionusa.com

RESOLUTION, INCORPORATED

ENVIRONMENTAL CONSULTANTS

1101 A DARBYTOWN DRIVE NASHVILLE, TN 37207 (615) 865-8813 FAX (615) 868-4140

ASBESTOS SAMPLE COLLECTION DATA SHEET

PROJECT NUMBER: 159719

PROJECT LOCATION: 907 Hatcher Lane, Columbia Tennessee 38401

PROJECT DATE: 1/20/2020

CONTRACTOR: ESI

REMOVAL ACTIVITY: Floortile and mastic

ANALYTICAL METHOD: NIOSH 7400 - "A" COUNTING RUL

TECHNICIAN: Dominic Motes

SUPERVISOR: Josh Goodman

SAMPLE	SAMPLE			RESP			TOTAL		VOLUI
I D	TYPE	LOCATION / NAME & SOCIAL SECURITY NUMBER	JOB TASK	PROT	TIME ON	TIME OFF	TIME	LPM	(UTER
1	IA	In Kitchen, ADJ to doorway			9:30	10:30	60	5	300
2	IA	In Kitchen, ADJ to sink			9:30	10:30	60	5	300
3	OA	In Kitchen, ADJ to fridge			9:30	10:30	60	5	300
4	CL	North Wall in containment			10:35	11:45	70	18	126
5	CL	South Wall in containment			10:35	11:45	70	18	126
6	CL	East Wall in containment			10:35	11:45	70	18	126
7	CL	West Wall containment			10:35	11:45	70	18	126
8	CL	Center of Containment			10:35	11:45	70	18	126
9	FB	Field Blank							

REMARKS:

SAMPLE TYPE: AM - Ambient; CL - Clearance; EXC - Excursion; IA - Inside Area; OA - Outside Area; PR - Personnel

RESPIRATORY PROTECTION: 1/2 - Half-Face; FULL - Full Face; PAPR - Powered Air Purifying Respirator

QA/QC CODE:

THE STATE OF TENNESSEE

Toxic Substances Program



Dominic A Motes

WGT 150

Expiration Mar-31-2020 A-1-122940-75589 Mar-31-2020

A-PM-122940-75588 Project Monitor

Asbestos Accreditation



THE STATE OF TENNESSEE

Department of Environment and Conservation Division of Solid Waste Management Toxic Substances Program

> William R. Snodgrass Tennessee Tower 312 Rosa L. Parks Avenue, 14th Floor Nashville TN 37243

By virtue of the authority vested by the Division of Solid Waste Management, the Company named below is hereby accreditted to offer and/or conduct Asbestos activities pursuant to Rule 1200-01-20:

Resolution Incorporated

1101-A Darbytown Dr Nashville TN, 37207

to conduct ASBESTOS ACTIVITIES in schools or public and commercial buildings in Tennessee.

This firm is responsible for compliance with the applicable requirements of Rule 1200-01-20.

Discipline Type Accreditation Number Effective Date Expiration Date

Accreditation Re-Accreditation A-F-690-82185 November 06, 2019 December 31, 2020



Given under the Seal of the State of Tennessee in Nashville.

This 6th

Day of November 2019

Division of Solid Waste Management Toxic Substance Program

CN-1324

(Rev 6/13)

RDA-3020

<u>PERIO</u>	DIC SURVEILLANCE REPORT				
LEA NAME: CHESTER COUNTY BOE			LEA NO:		
SCHOOL	NAME: JACKS CREEK ELEMENTARY		SCHOOL	NO.: <u>120-0025</u>	
BUILDIN	NG NAME: <u>MAIN</u>			100	
	UCTIONS: AHERA regulations require School building containing A in the HA#, Description of A date removed in the appropria	a Periodic Surveill CBM must be inspe CBM, and Area In	ected. Put the date spected. If the AG	in the appropriat CBM has been re	e column. Fill moved put the
			1st six months Date 8/8/2018 (Fall)	2nd six months Date (Spring)	¥
HA#	DESCRIPTION OF ACBM	AREA INSPECTED	ACBM CONDITION*	ACBM CONDITION*	DATE REMOVED
1	Floor tile	All	Good	Good	
2	Floor tile	All	Good	Good	
3	Floor tile	All	Good	Good	
4	Floor tile	All	Good	Good	
	2x4 Ceiling tile	All	Good	Good	
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	LLANCE INSPECTOR'S NAME (please print): LLANCE INSPECTOR'S SIGNATURE:	Britt Eads	*IF NO CHA	NGE IN CONDITI	ON WRITE N/C

SURVEILLANCE INSPECTOR'S NAME (please print): Britt Eads
SURVEILLANCE INSPECTOR'S SIGNATURE:
(Surveillance Inspector is not required to be AHERA certified)

AHERA Accreditation Number/Date (if applicable):

TAHERA 9.0 (2/97)