



INTERIOR PRE-ABATEMENT CHECKLIST

Project Name / #: Osborn School Date: 7-15-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License #: 388
Site Supervisor: S. Papisner License #: 2633 Workers on site: 6
Daily Start: 0600 Daily Stop: 1630
Work Area (s): Gym
Scope of Work: Equipment, Floor, Expansion Joints, HVAC, Roof

REMOVAL

ENCAPSULATION

ENCASEMENT

GLOVEBAG

CHECKLIST: (Y = Yes; N = No; N/A = Not applicable)

- | | | | |
|---|-------------------------------------|----------------------------------|-------------------------------------|
| 1. Warning Signs (19a-332a-5(a)) | ☒ | 12. Worker Certs. On site | ☒ |
| 2. Entry Secure | ☒ | 13. Negative Air (19a-332a-5(h)) | ☒ |
| 3. Two Layers of 6-mil Poly | ☒ | Neg Air Calculation Complete | ☒ |
| All penetrations(19a-332a-5(c)) | ☒ | 4 air changes per hour | ☒ |
| All fixed objects (19a-332a-5(d)) | ☒ | Number of units | <u>2</u> |
| Walls (19a-332a-5(e)) | ☒ | Manometer reading | ☒ |
| Ceilings | <u>N/A</u> | 14. Copy of Notification | ☒ |
| 4. Decontamination facility (19a-332a-6(a)) | | 15. Copy of Specifications | ☒ |
| Personnel | ☒ | 16. Copy of Regulations | ☒ |
| Equipment/Waste | ☒ | 17. PPE required | ☒ |
| Shower | ☒ | 18. AWP on site | <u>N/A</u> |
| Filtration System (19a-332a-5(i)) | ☒ | AWP allows for: | |
| 5. Decon Entry Sign-In Sheet | ☒ | | |
| 6. Temporary Lighting | <u>N/A</u> | | |
| 7. Electrical System Off | ☒ | NOTES: | |
| 8. HVAC Systems Off | ☒ | | |
| 9. Communication System | ☒ | | |
| 10. Emergency Warning System | ☒ | | |
| 11. Emergency Exit | ☒ | | |

PASS

FAIL

Project Monitor Name: Blaze Graham License #: 5588

Signature: [Signature]



INTERIOR PRE-ABATEMENT CHECKLIST

Project Name / #: Osborn School Date: 7-22-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License #: 388
Site Supervisor: S Plisher License #: 2633 Workers on site: 6
Daily Start: 0600 Daily Stop: 1630
Work Area (s): Windows 122-124
Scope of Work: Windows, Brick, Block

REMOVAL

ENCAPSULATION

ENCASEMENT

GLOVEBAG

CHECKLIST: (Y = Yes; N = No; N/A = Not applicable)

1. Warning Signs (19a-332a-5(a)) ☒
2. Entry Secure ☒
3. Two Layers of 6-mil Poly ☒
All penetrations (19a-332a-5(c)) ☒
All fixed objects (19a-332a-5(d)) ☒
Walls (19a-332a-5(e)) ☒
Ceilings ☒
4. Decontamination facility (19a-332a-6(a)) ☒
Personnel ☒
Equipment/Waste ☒
Shower ☒
Filtration System (19a-332a-5(i)) ☒
5. Decon Entry Sign-In Sheet ☒
6. Temporary Lighting ☒
7. Electrical System Off ☒
8. HVAC Systems Off ☒
9. Communication System ☒
10. Emergency Warning System ☒
11. Emergency Exit ☒

12. Worker Certs. On site ☒
13. Negative Air (19a-332a-5(h)) ☒
Neg Air Calculation Complete ☒
4 air changes per hour ☒
Number of units 2
Manometer reading ☒
14. Copy of Notification ☒
15. Copy of Specifications ☒
16. Copy of Regulations ☒
17. PPE required ☒
18. AWP on site ☒
AWP allows for: N/A

NOTES: _____

PASS

FAIL

Project Monitor Name: Blaze Graham License #: 5588

Signature: _____



INTERIOR PRE-ABATEMENT CHECKLIST

Project Name / #: Osborn School Date: 7-23-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License #: 388
Site Supervisor: S Plisner License #: 2633 Workers on site: 6
Daily Start: 0600 Daily Stop: 1630
Work Area (s): Windows 119-121
Scope of Work: Windows, Brick, Block

REMOVAL

ENCAPSULATION

ENCASEMENT

GLOVEBAG

CHECKLIST: (Y = Yes; N = No; N/A = Not applicable)

- | | | | |
|---|-------------------------------------|----------------------------------|-------------------------------------|
| 1. Warning Signs (19a-332a-5(a)) | ☒ | 12. Worker Certs. On site | ☒ |
| 2. Entry Secure | ☒ | 13. Negative Air (19a-332a-5(h)) | ☒ |
| 3. Two Layers of 6-mil Poly | ☒ | Neg Air Calculation Complete | ☒ |
| All penetrations(19a-332a-5(c)) | ☒ | 4 air changes per hour | ☒ |
| All fixed objects (19a-332a-5(d)) | ☒ | Number of units | <u>2</u> |
| Walls (19a-332a-5(e)) | ☒ | Manometer reading | ☒ |
| Ceilings | ☒ | 14. Copy of Notification | ☒ |
| 4. Decontamination facility (19a-332a-6(a)) | | 15. Copy of Specifications | ☒ |
| Personnel | ☒ | 16. Copy of Regulations | ☒ |
| Equipment/Waste | ☒ | 17. PPE required | ☒ |
| Shower | ☒ | 18. AWP on site | <u>N/A</u> |
| Filtration System (19a-332a-5(i)) | ☒ | AWP allows for: | |
| 5. Decon Entry Sign-In Sheet | ☒ | | |
| 6. Temporary Lighting | ☒ | | |
| 7. Electrical System Off | ☒ | NOTES: | |
| 8. HVAC Systems Off | ☒ | | |
| 9. Communication System | ☒ | | |
| 10. Emergency Warning System | ☒ | | |
| 11. Emergency Exit | ☒ | | |

PASS

FAIL

Project Monitor Name: Bleze Graham License #: 5588

Signature: [Signature]



ENVIRONMENTAL, LLC

INTERIOR PRE-ABATEMENT CHECKLIST

Project Name / #: Osborn School Date: 7-25-14
 Site Address: 760 Stillson Rd, Fairfield, CT
 Contractor: Enco License #: 388
 Site Supervisor: S. Plisner License #: 2633 Workers on site: 7
 Daily Start: 0600 Daily Stop: 1630
 Work Area (s): Windows 116-118
 Scope of Work: Window Frame, Caulking, Brick, Block

REMOVAL**ENCAPSULATION****ENCASEMENT****GLOVEBAG**

CHECKLIST: (Y = Yes; N = No; N/A = Not applicable)

- | | | | |
|---|----------|----------------------------------|------------|
| 1. Warning Signs (19a-332a-5(a)) | <u>✓</u> | 12. Worker Certs. On site | <u>✓</u> |
| 2. Entry Secure | <u>✓</u> | 13. Negative Air (19a-332a-5(h)) | <u>✓</u> |
| 3. Two Layers of 6-mil Poly | <u>✓</u> | Neg Air Calculation Complete | <u>✓</u> |
| All penetrations(19a-332a-5(c)) | <u>✓</u> | 4 air changes per hour | <u>✓</u> |
| All fixed objects (19a-332a-5(d)) | <u>✓</u> | Number of units | <u>2</u> |
| Walls (19a-332a-5(e)) | <u>✓</u> | Manometer reading | <u>✓</u> |
| Ceilings | <u>✓</u> | 14. Copy of Notification | <u>✓</u> |
| 4. Decontamination facility (19a-332a-6(a)) | <u>✓</u> | 15. Copy of Specifications | <u>✓</u> |
| Personnel | <u>✓</u> | 16. Copy of Regulations | <u>✓</u> |
| Equipment/Waste | <u>✓</u> | 17. PPE required | <u>✓</u> |
| Shower | <u>✓</u> | 18. AWP on site | <u>N/A</u> |
| Filtration System (19a-332a-5(i)) | <u>✓</u> | AWP allows for: _____ | |
| 5. Decon Entry Sign-In Sheet | <u>✓</u> | | |
| 6. Temporary Lighting | <u>✓</u> | | |
| 7. Electrical System Off | <u>✓</u> | NOTES: _____ | |
| 8. HVAC Systems Off | <u>✓</u> | _____ | |
| 9. Communication System | <u>✓</u> | _____ | |
| 10. Emergency Warning System | <u>✓</u> | _____ | |
| 11. Emergency Exit | <u>✓</u> | _____ | |

PASS**FAIL**Project Monitor Name: Blaze Graham License #: 5588Signature: [Signature]



INTERIOR PRE-ABATEMENT CHECKLIST

Project Name / #: Osborn School Date: 7-28-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License #: 388
Site Supervisor: S. Plisner License #: 2633 Workers on site: 7
Daily Start: 0600 Daily Stop: 1630
Work Area (s): Hallway
Scope of Work: Floor Tile, Mastic, Paint

REMOVAL

ENCAPSULATION

ENCASEMENT

GLOVEBAG

CHECKLIST: (Y = Yes; N = No; N/A = Not applicable)

- | | | | |
|---|-------------------------------------|----------------------------------|-------------------------------------|
| 1. Warning Signs (19a-332a-5(a)) | ☒ | 12. Worker Certs. On site | ☒ |
| 2. Entry Secure | ☒ | 13. Negative Air (19a-332a-5(h)) | ☒ |
| 3. Two Layers of 6-mil Poly | ☒ | Neg Air Calculation Complete | ☒ |
| All penetrations(19a-332a-5(c)) | ☒ | 4 air changes per hour | ☒ |
| All fixed objects (19a-332a-5(d)) | ☒ | Number of units | <u>3</u> |
| Walls (19a-332a-5(e)) | ☒ | Manometer reading | ☒ |
| Ceilings | ☒ | 14. Copy of Notification | ☒ |
| 4. Decontamination facility (19a-332a-6(a)) | ☒ | 15. Copy of Specifications | ☒ |
| Personnel | ☒ | 16. Copy of Regulations | ☒ |
| Equipment/Waste | ☒ | 17. PPE required | ☒ |
| Shower | ☒ | 18. AWP on site | <u>N/A</u> |
| Filtration System (19a-332a-5(i)) | ☒ | AWP allows for: _____ | |
| 5. Decon Entry Sign-In Sheet | ☒ | | |
| 6. Temporary Lighting | ☒ | | |
| 7. Electrical System Off | ☒ | NOTES: _____ | |
| 8. HVAC Systems Off | ☒ | _____ | |
| 9. Communication System | ☒ | _____ | |
| 10. Emergency Warning System | ☒ | _____ | |
| 11. Emergency Exit | ☒ | _____ | |

PASS

FAIL

Project Monitor Name: Blaze Graham License #: 5588

Signature: _____



INTERIOR PRE-ABATEMENT CHECKLIST

Project Name / #: Osborn School Date: 8-5-14
Site Address: 260 Stillson Rd, Fairfield, CT
Contractor: Enco License #: 388
Site Supervisor: S. Plisner License #: 2633 Workers on site: 7
Daily Start: 0600 Daily Stop: 1630
Work Area (s): Hallway 2
Scope of Work: _____

REMOVAL

ENCAPSULATION

ENCASEMENT

GLOVEBAG

CHECKLIST: (Y = Yes; N = No; N/A = Not applicable)

- | | | | |
|---|-------------------------------------|----------------------------------|-------------------------------------|
| 1. Warning Signs (19a-332a-5(a)) | ☒ | 12. Worker Certs. On site | ☒ |
| 2. Entry Secure | ☒ | 13. Negative Air (19a-332a-5(h)) | ☒ |
| 3. Two Layers of 6-mil Poly | ☒ | Neg Air Calculation Complete | ☒ |
| All penetrations(19a-332a-5(c)) | ☒ | 4 air changes per hour | ☒ |
| All fixed objects (19a-332a-5(d)) | ☒ | Number of units | <u>1</u> |
| Walls (19a-332a-5(e)) | ☒ | Manometer reading | ☒ |
| Ceilings | ☒ | 14. Copy of Notification | ☒ |
| 4. Decontamination facility (19a-332a-6(a)) | ☒ | 15. Copy of Specifications | ☒ |
| Personnel | ☒ | 16. Copy of Regulations | ☒ |
| Equipment/Waste | ☒ | 17. PPE required | ☒ |
| Shower | ☒ | 18. AWP on site | <u>N/A</u> |
| Filtration System (19a-332a-5(i)) | ☒ | AWP allows for: _____ | |
| 5. Decon Entry Sign-In Sheet | ☒ | | |
| 6. Temporary Lighting | ☒ | | |
| 7. Electrical System Off | ☒ | NOTES: _____ | |
| 8. HVAC Systems Off | ☒ | _____ | |
| 9. Communication System | ☒ | _____ | |
| 10. Emergency Warning System | ☒ | _____ | |
| 11. Emergency Exit | ☒ | _____ | |

PASS

FAIL

Project Monitor Name: Blaze Graham License #: 5588

Signature: _____



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-16-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 2
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: Non-intrusive equipment removal

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-17-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Pligner License No: 2633 Workers on Site: 5
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: Non-Intrusive Equipment Removal

CONTAINMENT

- 1) Decon: Contiguous: ☒ Remote: _____ Location: _____
2) Critical Intact: Yes: ☒ No: _____
3) Wall Poly In Tact: Yes: ☒ No: _____
4) Breaches in Containment: Yes: _____ No: ☒
5) Visible Dust Emissions Observed: Yes: _____ No: ☒
6) Corrective Actions Taken: Yes: ☒ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ☒ No: _____
10) Number of Negative Air Machines Required in Containment: 48 No. Running: 48
11) Airless Sprayer of Water in Work Area Operable: Yes: ☒ No: _____
12) Amended Water being Used: Yes: ☒ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ☒ No: _____
14) Auxiliary Lighting Sufficient: Yes: ☒ No: _____
15) Decon Cleaned at End of Shift: Yes: ☒ No: _____
16) Decon Wastewater Filters in Place: Yes: ☒ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ☒ No: _____

NOTES: _____

Project Monitor Name: Blaire Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-18-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisne License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: Non-intrusive Equipment Removal

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-19-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: Equipment Removal

CONTAINMENT

1) Decon: Contiguous: ☒ Remote: _____ Location: _____
2) Critical Intact: Yes: ☒ No: _____
3) Wall Poly In Tact: Yes: ☒ No: _____
4) Breaches in Containment: Yes: _____ No: ☒
5) Visible Dust Emissions Observed: Yes: _____ No: ☒
6) Corrective Actions Taken: Yes: ☒ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ☒ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ☒ No: _____
12) Amended Water being Used: Yes: ☒ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ☒ No: _____
14) Auxiliary Lighting Sufficient: Yes: ☒ No: _____
15) Decon Cleaned at End of Shift: Yes: ☒ No: _____
16) Decon Wastewater Filters in Place: Yes: ☒ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ☒ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: 5586
License No: [Signature] Time in Containment: 9 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-21-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site:
Daily Start: 0600 Stop: 1430
Work Area: Gym
Scope of Work: Equipment Removal

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: Location:
2) Critical Intact: Yes: ✓ No:
3) Wall Poly In Tact: Yes: ✓ No:
4) Breaches in Containment: Yes: No: ✓
5) Visible Dust Emissions Observed: Yes: No: ✓
6) Corrective Actions Taken: Yes: ✓ No:
7) Monometer Reading: Inches of Water
8) Smoke Test of Containment: Yes: No:
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No:
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 21
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No:
12) Amended Water being Used: Yes: ✓ No:
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No:
14) Auxiliary Lighting Sufficient: Yes: ✓ No:
15) Decon Cleaned at End of Shift: Yes: ✓ No:
16) Decon Wastewater Filters in Place: Yes: ✓ No:
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No:

NOTES:

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-22-14
Site Address: 760 Stillson Rd
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 6
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: Equipment Removal

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-23-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: Walls, equipment, floor, ceiling.

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: 5588
License No: 5588 Time in Containment: 15 min



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-23-14
Site Address: 760 Stilson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 122-124
Scope of Work: Windows, Frame, Brick, & Block Removal

CONTAINMENT

- 1) Decon: Contiguous: ☒ Remote: _____ Location: _____
2) Critical Intact: Yes: ☒ No: _____
3) Wall Poly In Tact: Yes: ☒ No: _____
4) Breaches in Containment: Yes: _____ No: ☒
5) Visible Dust Emissions Observed: Yes: _____ No: ☒
6) Corrective Actions Taken: Yes: ☒ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ☒ No: _____
10) Number of Negative Air Machines Required in Containment: 2 No. Running: 2
11) Airless Sprayer of Water in Work Area Operable: Yes: ☒ No: _____
12) Amended Water being Used: Yes: ☒ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ☒ No: _____
14) Auxiliary Lighting Sufficient: Yes: ☒ No: _____
15) Decon Cleaned at End of Shift: Yes: ☒ No: _____
16) Decon Wastewater Filters in Place: Yes: ☒ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ☒ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 1/2 hrs



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-25-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 124-122, Windows 119-121
Scope of Work: Windows, Frames, Caulk, Block, Brick

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2 No. Running: 2
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 14r



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-26-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 288
Site Supervisor: S. Plisner License No: 2633 Workers on Site:
Daily Start: 0600 Stop: 1630
Work Area: Windows 124-122, 121-119, 118, 116
Scope of Work:

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: Location:
2) Critical Intact: Yes: ✓ No:
3) Wall Poly In Tact: Yes: ✓ No:
4) Breaches in Containment: Yes: No: ✓
5) Visible Dust Emissions Observed: Yes: No: ✓
6) Corrective Actions Taken: Yes: ✓ No:
7) Monometer Reading: Inches of Water
8) Smoke Test of Containment: Yes: No:
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No:
10) Number of Negative Air Machines Required in Containment: 2/3/2 No. Running: 2/3/2
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No:
12) Amended Water being Used: Yes: ✓ No:
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No:
14) Auxiliary Lighting Sufficient: Yes: ✓ No:
15) Decon Cleaned at End of Shift: Yes: ✓ No:
16) Decon Wastewater Filters in Place: Yes: ✓ No:
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No:

NOTES:

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-28-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 124-122, 121-119, 118-116
Scope of Work: Window, window frames, Caulk, Brick, Block

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: ✓
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2/3/2 No. Running: 2/3/2
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: _____ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-29-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Pligier License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 124-122, 121-119, 118-116 & Hallway
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-3 No. Running: 2-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-30-14
Site Address: 260 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S Pligner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 121-119, 118-116 & Hallway
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-3 No. Running: 2-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 7-31-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 121-119, 118-116 & Hallway
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-3 No. Running: 2-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-1-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 121-119, 118-116, & Hallway
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-3 No. Running: 2-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaire Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-4-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 121-119, 118-116, & Hallway
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-3 No. Running: 2-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-5-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 121-119, 118-116 1/2 Hallway
Scope of Work: _____

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-3 No. Running: 2-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: Blaze Graham
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-6-14
Site Address: 260 Stillson Rd, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallway 132, Windows 121-119
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 1-3 No. Running: 1-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-7-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallways
Scope of Work: _____

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-3 No. Running: 2-3
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-8-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallways
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 3-4 No. Running: 3-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 1/2 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-9-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallways
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-4 No. Running: 2-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-10-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallways & Gymnasium
Scope of Work: _____

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-4 No. Running: 2-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 2 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-11-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallway & Gym
Scope of Work: _____

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-4 No. Running: 2-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 2 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-12-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallway & Gym
Scope of Work: _____

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-4 No. Running: 2-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-13-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: hallway & Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-4 No. Running: 2-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-14-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallway & Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 2-4 No. Running: 2-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8/15/14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallways & Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 1-4 No. Running: 1-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8/16/14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Hallways & Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 1-4 No. Running: 1-4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES:

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 14'



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-18-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-19-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-20-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
- 2) Critical Intact: Yes: ✓ No: _____
- 3) Wall Poly In Tact: Yes: ✓ No: _____
- 4) Breaches in Containment: Yes: _____ No: ✓
- 5) Visible Dust Emissions Observed: Yes: _____ No: ✓
- 6) Corrective Actions Taken: Yes: ✓ No: _____
- 7) Monometer Reading: _____ Inches of Water
- 8) Smoke Test of Containment: Yes: _____ No: _____
- 9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
- 10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
- 11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
- 12) Amended Water being Used: Yes: ✓ No: _____
- 13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
- 14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
- 15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
- 16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
- 17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-21-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-22-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 1/2 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-23-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-25-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 26
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxilliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-26-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 76
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 140



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-27-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 26
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 2 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-28-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 26
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ☒ Remote: _____ Location: _____
2) Critical Intact: Yes: ☒ No: _____
3) Wall Poly In Tact: Yes: ☒ No: _____
4) Breaches in Containment: Yes: _____ No: ☒
5) Visible Dust Emissions Observed: Yes: _____ No: ☒
6) Corrective Actions Taken: Yes: ☒ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ☒ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ☒ No: _____
12) Amended Water being Used: Yes: ☒ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ☒ No: _____
14) Auxilliary Lighting Sufficient: Yes: ☒ No: _____
15) Decon Cleaned at End of Shift: Yes: ☒ No: _____
16) Decon Wastewater Filters in Place: Yes: ☒ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ☒ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 111



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 8-29-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: _____
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: _____ No. Running: _____
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]

License No: 5588 Time in Containment: _____



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-2-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ☒ Remote: _____ Location: _____
2) Critical Intact: Yes: ☒ No: _____
3) Wall Poly In Tact: Yes: ☒ No: _____
4) Breaches in Containment: Yes: _____ No: ☒
5) Visible Dust Emissions Observed: Yes: _____ No: ☒
6) Corrective Actions Taken: Yes: ☒ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ☒ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ☒ No: _____
12) Amended Water being Used: Yes: ☒ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ☒ No: _____
14) Auxiliary Lighting Sufficient: Yes: ☒ No: _____
15) Decon Cleaned at End of Shift: Yes: ☒ No: _____
16) Decon Wastewater Filters in Place: Yes: ☒ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ☒ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-3-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 73
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 1/2 hrs



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-4-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ☒ Remote: _____ Location: _____
2) Critical Intact: Yes: ☒ No: _____
3) Wall Poly In Tact: Yes: ☒ No: _____
4) Breaches in Containment: Yes: _____ No: ☒
5) Visible Dust Emissions Observed: Yes: _____ No: ☒
6) Corrective Actions Taken: Yes: ☒ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ☒ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ☒ No: _____
12) Amended Water being Used: Yes: ☒ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ☒ No: _____
14) Auxiliary Lighting Sufficient: Yes: ☒ No: _____
15) Decon Cleaned at End of Shift: Yes: ☒ No: _____
16) Decon Wastewater Filters in Place: Yes: ☒ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ☒ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-5-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]

License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-8-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 1/2 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-9-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 2 hrs



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-10-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-11-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr.



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-12-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-13-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 25
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ☒ Remote: _____ Location: _____
2) Critical Intact: Yes: ☒ No: _____
3) Wall Poly In Tact: Yes: ☒ No: _____
4) Breaches in Containment: Yes: _____ No: ☒
5) Visible Dust Emissions Observed: Yes: _____ No: ☒
6) Corrective Actions Taken: Yes: ☒ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ☒ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ☒ No: _____
12) Amended Water being Used: Yes: ☒ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ☒ No: _____
14) Auxiliary Lighting Sufficient: Yes: ☒ No: _____
15) Decon Cleaned at End of Shift: Yes: ☒ No: _____
16) Decon Wastewater Filters in Place: Yes: ☒ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ☒ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]

License No: 5588 Time in Containment: 2 hrs



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-15-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-16-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 23
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 2 hrs



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-17-14
Site Address: 260 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 3
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-18-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 73
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-19-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 23
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-20-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 13
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-22-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 4
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 2 hrs



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-23-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 24
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 1 hr



INTERIOR ABATEMENT DAILY WORK AREA CHECKLIST

Project Name/No: Osborn School Date: 9-24-14
Site Address: 760 Stillson Road, Fairfield, CT
Contractor: Enco License No: 388
Site Supervisor: S. Plisner License No: 2633 Workers on Site: 20
Daily Start: 0600 Stop: 1630
Work Area: Gym
Scope of Work: _____

CONTAINMENT

- 1) Decon: Contiguous: ✓ Remote: _____ Location: _____
2) Critical Intact: Yes: ✓ No: _____
3) Wall Poly In Tact: Yes: ✓ No: _____
4) Breaches in Containment: Yes: _____ No: ✓
5) Visible Dust Emissions Observed: Yes: _____ No: ✓
6) Corrective Actions Taken: Yes: ✓ No: _____
7) Monometer Reading: _____ Inches of Water
8) Smoke Test of Containment: Yes: _____ No: _____
9) All Ingresses to Work Area Posted with Warning Signs: Yes: ✓ No: _____
10) Number of Negative Air Machines Required in Containment: 4 No. Running: 4
11) Airless Sprayer of Water in Work Area Operable: Yes: ✓ No: _____
12) Amended Water being Used: Yes: ✓ No: _____
13) All Electrical Devices Equipped with GFCI: Yes: ✓ No: _____
14) Auxiliary Lighting Sufficient: Yes: ✓ No: _____
15) Decon Cleaned at End of Shift: Yes: ✓ No: _____
16) Decon Wastewater Filters in Place: Yes: ✓ No: _____
17) Decon Wastewater Filtered at End of Shift: Yes: ✓ No: _____

NOTES: _____

Project Monitor Name: Blaze Graham Signature: [Signature]
License No: 5588 Time in Containment: 6 hrs



INTERIOR ABATEMENT FINAL VISUAL DATA SHEET

Project Name/#: Osborn School Date: 7-24-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License #: 388
Site Supervisor: S Plisner License #: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows 124-122
Scope of Work: Window frames, caulking, bricks & Block

Remaining ACM in Work Area Not in Scope of Work: _____

- 1) Type of Abatement: (circle one) Removal Spot Repair Glove Bag
- 2) Polyethylene Sheeting Dry and Free of Dust and Debris: ✓
- 3) Floors Dry and Free of Dust and Debris: ✓
- 4) Horizontal Surfaces Dry and Free of Dust and Debris: ✓
- 5) Pipes Dry and Free of Dust and Debris: ✓
- 6) Ducts Dry and Free of Dust and Debris: ✓
- 7) Pre-Filters Changed on Negative Air Equipment: ✓
- 8) All Tools and Equipment Out of Work Area: ✓
- 9) Decon is Dry and Free of Dust and Debris: ✓
- 10) Decon Shower Basin in Pumped Free of Water: ✓
- 11) Decon Operational at Time of Visual Inspection: ✓
- 12) All Substrates from which ACM was Removed is Dry and Free of Dust and Debris: ✓
- 13) Work Area Encapsulated Prior to Final Visual Inspection: ✓
- 14) Was Additional Cleaning or Abatement Required: Yes _____ No ✓
- 15) Was Additional Cleaning Completed: Yes _____ No _____
- 16) Does the Work Area Meet the Final Visual Inspection Criteria: Yes ✓ No _____
- 17) Is Re-Occupancy Air Clearance Sampling Required for this Project: TEM PCM No: 5
- 18) Inspection Results: **PASS** **FAIL**

Project Monitoring Signature: [Signature] License #: 5588



INTERIOR ABATEMENT FINAL VISUAL DATA SHEET

Project Name/#: Osgorn School Date: 7-26-14
Site Address: 760 Stillson Rd, Fairfield, CT
Contractor: Enco License #: 388
Site Supervisor: S. Plisner License #: 2633 Workers on Site: 7
Daily Start: 0600 Stop: 1630
Work Area: Windows - ~~125-124-123~~ 121-119, ~~118-116~~
Scope of Work: Windows, Frames, Caulk, Brick, ~~Block~~

Remaining ACM in Work Area Not in Scope of Work: ~~AW~~ N/A

- 1) Type of Abatement: (circle one) Removal Spot Repair Glove Bag
- 2) Polyethylene Sheeting Dry and Free of Dust and Debris: ✓
- 3) Floors Dry and Free of Dust and Debris: ✓
- 4) Horizontal Surfaces Dry and Free of Dust and Debris: ✓
- 5) Pipes Dry and Free of Dust and Debris: ✓
- 6) Ducts Dry and Free of Dust and Debris: ✓
- 7) Pre-Filters Changed on Negative Air Equipment: ✓
- 8) All Tools and Equipment Out of Work Area: ✓
- 9) Decon is Dry and Free of Dust and Debris: ✓
- 10) Decon Shower Basin in Pumped Free of Water: ✓
- 11) Decon Operational at Time of Visual Inspection: ✓
- 12) All Substrates from which ACM was Removed is Dry and Free of Dust and Debris: ✓
- 13) Work Area Encapsulated Prior to Final Visual Inspection: ✓
- 14) Was Additional Cleaning or Abatement Required: Yes No ✓
- 15) Was Additional Cleaning Completed: Yes No
- 16) Does the Work Area Meet the Final Visual Inspection Criteria: Yes ✓ No
- 17) Is Re-Occupancy Air Clearance Sampling Required for this Project: TEM PCM No:
- 18) Inspection Results: **PASS** **FAIL**

Project Monitoring Signature: [Signature] License #: 0388