

**AHERA REINSPECTION REPORT -- DEP 4061**

**LEA** Russell County Schools - 521


**SCHOOL** Administration Building


**Introduction.** The Asbestos Hazard Emergency Response Act (AHERA) requires Local Education Agencies (LEAs) to use accredited inspectors to reinspect asbestos-containing building materials (ACBM) which were identified in previous AHERA inspection(s). Reinspections are required at least once every three years after the management plan goes into effect for those school buildings whose last inspection/reinspection identified ACBM. Reinspection results must be submitted to the LEA and the Division for Air Quality within 30 days after the reinspection. Results must include information regarding (1) reinspected and newly discovered ACBM (amounts, assessments, sampling information, etc.); (2) any needed revisions by accredited management planners and LEAs to response actions planned; (3) records of periodic surveillance, O&M training, O&M activities, fiber releases, and response actions taken; and (4) accreditations, assurances, annual plan-availability notifications to parents and employees, and other AHERA-required information.

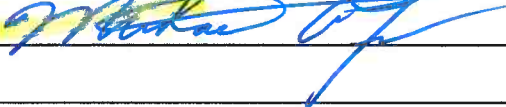
**Instructions for completing this form: Complete either item I. or item II., below, as appropriate. Do not complete this form if no ACBM was identified in the last inspection/reinspection.**

**I.** Reinspection results show no change to information in existing management plan.  
*(If checked, then accredited inspector needs to attach a newly completed Form 5.0 and current accreditation certificates, and LEA representatives and inspector need to sign the assurances immediately below. Also include in the submittal the information identified in items (3) and (4), above.)*

I affirm that an accredited AHERA inspector has reinspected all confirmed and assumed ACBM identified in previous AHERA inspections/reinspections and, if applicable, has verified (*attach verification*) removal of all previously identified ACBM which was removed since the last inspection/reinspection.

Accredited Inspector's Signature/Date  8/17/16

LEA Designated Person's Signature/Date 

LEA Superintendent's Signature/Date 

Reinspection Date August 30, 2016

**II.** Reinspection reports show change to information in management plan.  
*(If checked, then the items identified in I., above, must be submitted, along with all revised or new homogeneous area forms, revised or new responses recommended by management planner and selected by LEA, and sampling methodology and results.)*

Number of 6.0 Forms attached \_\_\_\_\_ (one for each homogeneous area, or HA)

Number of 6.1 Forms attached \_\_\_\_\_

Number of 3.0 Forms attached \_\_\_\_\_

Number of 3.1 Forms attached \_\_\_\_\_ (one for each response in each HA)

Number of samples taken \_\_\_\_\_

I affirm that an accredited AHERA inspector has reinspected all confirmed and assumed ACBM identified in previous AHERA inspections/reinspections and has verified (*attach verification*) removal of all previously identified ACBM which was removed since the last inspection/reinspection.

Accredited Inspector's Signature/Date \_\_\_\_\_

LEA Designated Person's Signature/Date \_\_\_\_\_

Accredited Management Planner's Signature/Date \_\_\_\_\_

LEA Superintendent's Signature/Date \_\_\_\_\_

Reinspection Date \_\_\_\_\_ Effective Date of these Revisions \_\_\_\_\_

DEP 6048

MANAGEMENT PLANNER (MP)

(ATTACH COPY OF TRAINING COURSE CERTIFICATES IN APPENDICES)

MANAGEMENT PLANNER:

ADDRESS: 1101A Darbytown Drive, Nashville, TN 37207

PHONE NO.: (615) 865-8813

MP SIGNATURE/DATE: Christopher R. John 9/13/16

KY. ACCREDIT. NO: P15-09-2477

TRAINING AGENCY: Resolution, Inc.

TRAINING COURSE: Asbestos Building Inspector & Management Planner

COURSE DATE: September 9, 2015

LOCAL EDUCATION AGENCY (LEA) DESIGNEE

DESIGNEE NAME: Mr. Scott Thomas

ADDRESS: 404 South Main Street, Jamestown, KY 42629

PHONE NO.: (270) 566-2826

TRAINING AGENCY:

TRAINING COURSE:

DATE(S) TAKEN:

NO. HOURS IN COURSE:

DOCUMENT SUMMARY

1.0 COVER SHEET

2.0 SCHOOL BUILDINGS

3.0 RESPONSE ACTIONS MANAGEMENT PLANNER RECOMMENDATIONS ONE (1) FORM FOR EACH SCHOOL

3.1 RESPONSE ACTION DETAILED ACTION TO BE TAKEN BY LEA ONE (1) FORM FOR EACH RESPONSE ACTION

4.0 FOLLOW-UP ACTIONS ONE (1) FORM FOR EACH SCHOOL

5.0 SCHOOL INFORMATION FORM ONE (1) FORM FOR EACH SCHOOL

6.0 HOMOGENEOUS AREA (HA) FORM ONE (1) FORM FOR EACH HOMOGENEOUS AREA

6.1 HOMOGENEOUS AREA DRAWING ONE (1) DRAWING FOR EACH HOMOGENEOUS AREA

BULK SAMPLE LOG/ANALYSIS

APPENDICES

THE SIGNATORIES BELOW CERTIFY THAT THE LOCAL EDUCATION AGENCY RESPONSIBILITIES, AS STIPULATED IN USEPA 40 CFR PART 763.84 HAVE BEEN MET OR WILL BE MET.

Scott Thomas LEA AHERA DESIGNEE SIGNATURE

9-21-16 DATE

Michael Ford LEA SUPERINTENDENT SIGNATURE

9/24/16 DATE

COVER SHEET

AHERA MANAGEMENT PLAN - KENTUCKY SCHOOLS

AS REQUIRED UNDER ASBESTOS HAZARD EMERGENCY RESPONSE ACT OF 1986 (AHERA) US ENVIRONMENTAL PROTECTION AGENCY REGULATIONS (40 CFR PART 763 SUBPART E; 401 KAR 58:010)

LEA: Russell County BOE LEA NAME LEA NO. 521

ADDRESS: 404 South Main Street, Jamestown, TN 42629

SUPERINTENDENT: Michael Ford

PHONE: (270) 343-3191

MANAGEMENT PLAN DATE: 8/22/88





**RESPONSE ACTION (RA)**

USE ONE (1) SHEET FOR EACH DIFFERENT RESPONSE ACTION

INSTITUTE PREVENTIVE MEASURES

REPAIR

ENCLOSE

ISOLATE

OPERATIONS & MAINTENANCE PROGRAM

ENCAPSULATE

REMOVE

OTHER

DETAILED DESCRIPTION OF MARKED RESPONSE ACTION

**LOCATIONS**

LIST ALL HOMOGENEOUS AREA NOS.; FUNCTIONAL SPACE NOS. OR ATTACH DRAWING

N/A

**REASONS**

GIVE REASONS FOR SELECTING RESPONSE ACTION (RA) (IF RA IS DIFFERENT FROM RECOMMENDATIONS ON FORM 3.0 - LIST REASONS FOR CHANGE)

O & M Program

**SCHEDULE**

STARTING DATE(S) & COMPLETION DATE(S) FOR RESPONSE ACTION

No response actions have occurred since the last three year reinspection

**RESOURCES NEEDED**

(TRAINED PERSONNEL, TOOLS, COST)

N/A

**RESPONSE ACTION**

TO BE IMPLEMENTED BY LEA

SCHOOL: Administration Building 999  
SCHOOL NAME SCHOOL NO.

LEA: Russell County Schools 521  
LEA NAME LEA NO.

NOTIFICATION PLAN

FOR INFORMING OCCUPANTS ABOUT ASBESTOS-RELATED ACTIVITIES AT THIS SCHOOL

See attached annual notification

PERIODIC SURVEILLANCE PLAN

TO BE CONDUCTED AT LEAST EVERY 6 MONTHS AFTER THE EFFECTIVE DATE OF THE MANAGEMENT PLAN

Periodic inspections are performed every 6 months by the designated person. See attached.

REINSPECTION PLAN

TO BE CONDUCTED AT LEAST EVERY 3 YEARS AFTER THE EFFECTIVE DATE OF THE MANAGEMENT PLAN

Three year reinspections are performed by a private consulting firm for the BOE every three years according AHERA guidelines.

FOLLOW-UP ACTIONS

TO BE IMPLEMENTED BY LEA

SCHOOL: Administration Building 999  
SCHOOL SCHOOL NO.

LEA: Russell County Schools 521  
LEA NAME LEA NO.

8/22/88  
MANAGEMENT PLAN DATE

**DEP 6048**

**INSPECTION INFORMATION**

ATTACH COPY OF TRAINING COURSE CERTIFICATE FOR EACH MEMBER

August 30, 2016

TEAM MEMBERS (PRINT OR TYPE)

Christopher R. Johnson

SIGNATURE

*Christopher R. Johnson 7/13/16*

KY. ACCREDITATION NO. TITLE

P15-09-2477

Management Planner

SURVEY DATE(S)

SURVEY TIME(S)

**BUILDING STATISTICS**

(OPTIONAL)

DATE BUILT	AREA NAME, ADDITION, WING, ETC.	USE	TOTAL AREA	FLOORS
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

NOTES:

**CONSTRUCTION INFORMATION**

(OPTIONAL)

WALLS:  Masonry Veneer      FLOOR STRUCTURE:  Wood      ROOF STRUCTURE:  Wood  
 Solid Masonry / Conc.       Concrete       Concrete  
 Wood       Steel       Steel  
 Other       Other       Other

NOTES:

**SCHOOL INFORMATION FORM**

LEA: Russell County Schools      521  
LEA NAME      LEA NO.

(OR BUILDING NAME) SCHOOL: Administration Building      999  
SCHOOL NAME      SCHOOL NO.