Appendix B
Daily Logs

LaCroix Davis LLC
Building & Environmental Forensics

DAILY PROJECT LOG - DATE: 9/24/09

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-11

Client	**Department of General Services (DGS)**	Shift	
Project	**California State Board of Equalization**	Number of Workers	
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold
Location	**Floor:** 6,5 **Room:** all VAV's	**Area:** above ceilings	
LCD Project #	**2372.02-572; SOW** 4.0	supplemental WDA	
Contractor	**JLS Environmental**		

CONTAINMENT INSPECTION

1. Type of Containment: NPE N/A Mini____ Barrier Tape____ Minor Procedures ____
2. Type of Decon: Shower____ 2-Stage____ 1Stage____ Drop Sheet W/Vacuum____ None____
3. Manometer? Yes____ No____ Readings: Start of Shift____; Middle of Shift____; End of Shift____
4. Containment and Decon Clean at End of Shift? (if no explain)____
5. Containment Smoke Tested by Contractor? ____
6. Negative Air Machines and/or HEPA Vacuums Aerosol Challenge Tested? ____
7. Negative Air Exhaust Location: Window____ Smoke Shaft____ Stairs____ Unoccupied Space____

N/A

SUMMARY OF DAILY ACTIVITIES

Removal____, Contractor Assist____ (If removal, state type of material, quantities, and removal method) ____

inspect above ceiling areas

Type of Waste Generated: Hazardous ____ Non-Hazardous____ Adequately Wet____ Manifest

Waste Load-Out?____ Hazardous Waste Manifest?____

Packaging: Bags, Double 6 Mil ____ Barrels____ Boxes____ Burrito Wrap____ Other____ N/A

Labels?____

Visual Inspections: Pre-abatement____ Pre-clearance____ Comments____

N/A

Contractor's PPE____

On-Site Visitors: 1.____ 2.____ 3.____ 4.____

Contractor Air Sampling? ____ Number of Workers Sampled____

LaCroix Davis Project LOG
9/24/09

PERSONAL EXPENSES:

Hotel: (Y or N?) Y Name of Hotel: QI

Per Diem? (Y or N?): Y Mileage? (Y or N?) Y Destination: site and

FIELD SUPPLIES: PPE: Suits? 0 Gloves (pairs)? 0 Respirator filters: 0

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name: 0

TIME	Activity
7:00	Floor plans, daily log and photographs complete, scan and transfer to LCD files
10:00AM	Complete files.
5:00	Contact JLS and HTI to discuss evening work & arrange to meet on floor 6
5:45	onsite to perform Supplemental WDA inspections on floor 6 and 5
9:00	complete work onsite HTI and LCD discuss continuing work 9/25/09

Signature [signature] Date 9/24/09

LaCroix Davis LLC
Building & Environmental Forensics

DAILY PROJECT LOG - DATE: 9/25/09

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-11

Client	**Department of General Services (DGS)**	Shift PM	
Project	**California State Board of Equalization**	Number of Workers	1
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold
Location	**Floor:** 5, 3 **Room:** VAV's	**Area:** all above ceiling and raised computer floor	
LCD Project #	**2372.02-572; SOW** 4.0	Supplemental WDA	
Contractor	**JLS Environmental**		

CONTAINMENT INSPECTION N/A

1. Type of Containment: NPE_____ Mini_____ Barrier Tape_____ Minor Procedures _____
2. Type of Decon: Shower_____ 2-Stage_____ 1Stage_____Drop Sheet W/Vacuum_____ None_____
3. Manometer? Yes____ No____ Readings: Start of Shift_____; Middle of Shift_____; End of Shift_____
4. Containment and Decon Clean at End of Shift? (if no explain)_____
5. Containment Smoke Tested by Contractor? _____
6. Negative Air Machines and/or HEPA Vacuums Aerosol Challenge Tested? _____
7. Negative Air Exhaust Location: Window_____ Smoke Shaft_____ Stairs_____ Unoccupied Space_____

SUMMARY OF DAILY ACTIVITIES

Removal_____, Contractor Assist_____ (If removal, state type of material, quantities, and removal method) _____

inspect above ceiling areas near VAV's (all floors)
inspect beneath raised computer floor in South area of floor

Type of Waste Generated: Hazardous _____ Non-Hazardous_____ Adequately Wet_____ Manifest N/A

Waste Load-Out?_____ Hazardous Waste Manifest?_____

Packaging: Bags, Double 6 Mil _____ Barrels_____ Boxes_____ Burrito Wrap_____ Other_____

Labels?_____

Visual Inspections: Pre-abatement____ Pre-clearance____ Comments N/A

Contractor's PPE N/A

On-Site Visitors: 1._____ 2._____ 3._____ 4._____

Contractor Air Sampling? — Number of Workers Sampled —

LaCroix Davis Project LOG

9/25/09

PERSONAL EXPENSES:

Hotel: (Y or N?) N Name of Hotel: QI

Per Diem? (Y or N?): Y Mileage? (Y or N?) Y Destination: site

FIELD SUPPLIES: PPE: Suits? 0 Gloves (pairs)? 0 Respirator filters: 0

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name: —

TIME	Activity
7:00 AM	– floor plans, daily logs and photographs complete, scan and transfer to LCD files.
10:00 AM	completed above – leave for casa. site work to start at 5:30 PM
17:00	Contact HTI and JLS to discuss evening work – arrange to meet on floor 5 and continue w/ VAV inspections.
17:45	at site to begin inspections – floor 5 computer floor – raised system inspect all areas of raised floor and TSI and wall gypsum board at partition and southern perimeter walls and column enclosures
	floor 5 VAV's – access to one room is not available
	floor 5 completed 7:30
	floor 4 will be revisited –
19:30	floor 3 inspections begin
20:00	HTI and LCD break

Signature [signature] Date 9/25/09

LaCroix Davis

DAILY PROJECT LOG - DATE: 11/13/09

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-11

Client	**Department of General Services (DGS)**	Shift AM	PM
Project	**California State Board of Equalization**	Number of Workers	
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold
Location	**Floor:** 16 **Room:** _____	**Area:** containments NE + NW water fountain	
LCD Project #	**2372.02-572; SOW** 5.0 ~~2372.03-572 SOW~~ 4.0	fire sprinkler riser cabinets	
Contractor	**JLS Environmental**	FLOORS 11 to 1	

CONTAINMENT INSPECTION

1. Type of Containment: NPE_____ Mini_____ Barrier Tape_____ Minor Procedures _____
2. Type of Decon: Shower_____ 2-Stage_____ 1Stage_____ Drop Sheet W/Vacuum_____ None_____
3. Manometer? Yes____ No____ Readings: Start of Shift_____; Middle of Shift_____; End of Shift_____
4. Containment and Decon Clean at End of Shift? (if no explain)_____
5. Containment Smoke Tested by Contractor? _____
6. Negative Air Machines and/or HEPA Vacuums Aerosol Challenge Tested? _____
7. Negative Air Exhaust Location: Window_____ Smoke Shaft_____ Stairs_____ Unoccupied Space_____

inspect removal of gypboard in water fountain containments
inspect cleaning of second layer
inspect encap of second layer

SUMMARY OF DAILY ACTIVITIES

Removal ✓, Contractor Assist_____ (If removal, state type of material, quantities, and removal method) _____
remove stained materials, clean second layers
encap cleaned surfaces

Type of Waste Generated: Hazardous _____ Non-Hazardous ✓ Adequately Wet_____ Manifest
Waste Load-Out? ✓ Hazardous Waste Manifest? NO
Packaging: Bags, Double 6 Mil ✓ Barrels_____ Boxes_____ Burrito Wrap_____ Other_____
Labels? NO
Visual Inspections: Pre-abatement____ Pre-clearance ✓ Comments_____

Contractor's PPE Tyvek, Respirators, Gloves
On-Site Visitors: 1._____ 2._____ 3._____ 4._____
Contractor Air Sampling? N Number of Workers Sampled Ø

LaCroix Davis Project LOG
Date: 11/13/09

PERSONAL EXPENSES:

Hotel: (Y or N?) Y Name of Hotel: QI

Per Diem? (Y or N?): Y Mileage? (Y or N?) Y Destination: site

FIELD SUPPLIES: PPE: Suits? _____ Gloves (pairs)? _____ Respirator filters: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name: _____

TIME	Activity
8:00	onsite

Signature _____ Date _____

LaCroix Davis Building & Environmental Forensics	**PROJECT LOG** DATE: 5/2/10 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 LCD REPS: TW ; ; PAGE 1 OF 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day____ Swing ✓ Weekend/Holiday____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 1 Floor 3 Floor 4 Floor 5
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ACM LBP
LCD Project # -Task	**2372.0 3 -572; SOW 5.0**	**Description:** Floor 1 SE Hall E	
LCD Project # -Task	**2372.0 3 -572; SOW 5.0**	**Description:** Fire Risers 3,4,5	
LCD Project # -Task	**2372.0____-572; SOW _____**	**Description:**	

CONTAINMENT INFORMATION

1. Type of Containment: NPE ✓ Mini ✓ Barrier Tape_____ Minor Procedures _____ HEPA _____
2. Type of Decon: Shower_____ 2-Stage_____ 1Stage ✓ Drop Sheet W/Vacuum_____ None ✓
3. Manometer? Yes ✓ No____ Strip Chart Record? Yes ✓ No ____ Adequate Pressure? Yes ✓ No ____ Comments Below.
4. Containment Entry Log? Yes ✓ No_____
5. Containment and Decon maintained in accordance with accepted practices and procedures? Yes ✓ No ___ Comment below.
6. Negative Air Machines and/or HEPA Vacuums Aerosol Challenge Tested? yes
7. Negative Air Exhaust Location: Window_____ Smoke Shaft_____ Stairs ✓ Unoccupied Space ✓
8. Site Security: 24 hr

SUMMARY OF ACTIVITIES

Mob/Demob ✓ Prep ✓ Removal ✓ Waste Load Out ✓ Detail Clean ✓ Encapsulation ✓ Clearance Testing___ Tear Down___

Visual Inspections: Pre-Abatement ✓ Pre-Encapsulation ✓ Pre-Clearance ✓ Post Tear Down_____

Comments: Floor 1 SE Hall E Remove cove base and Gypboard

Floors 3,4,5 Fire Risers SE - access, clean + encap

Waste Generated: Hazardous ____ Non-Hazardous/Construction Debris ✓ Adequately Wet_____ Waste Load-Out? _____

Packaging: Single 6 Mil_____ Double 6 Mil ✓ Barrels_____ Boxes_____ Burrito Wrap_____ Other_____

Hazardous Waste Manifest? N Waste Characterization? Y Labels? N

Location of Dumpster: Floor 1 SW garage

Comments: _____

Additional Worker PPE: Disposable Suits ✓ Gloves ✓ (Respirator) Half Face ✓ Full Face ✓ PAPR _____

Contractor Worker Exposure Monitoring? No # Workers Sampled —

On-Site Visitors: 1._____ 2._____ 3._____ 4._____

LaCroix Davis Project LOG
Date: 5/7/10

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits ✓ Gloves (pairs) ✓ Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name: _____

Notes

6 PM} JLS mobilizes to Floors 1 SE and Floors 3,4,5
1800} Fire Risers
2000 containments complete - all areas OK start
Floor 1 inspection as bottom 4" of gypboard wall is removed
No suspect VMG on reverse side of gypboard -
suspect water stain on opposite wall Sample # F1SE-T01
21:10 inspect Floor 4 Fire Riser removal & photo doc conditions
prior to detail cleaning - (No suspect stains observed)
21:20 inspect Floor 3 Fire Riser removal & photo doc conditions
prior to detail cleaning
21:30 inspect Floor 5 Fire Riser removal & photo doc conditions
prior to detail cleaning
crew break 21:30 to 22:15
22:15 Floor 1 hall - crew cleans up prior to sealing wall cavity.
with poly for testing, to ≈ 2 hours expected time
23:00 inspect Fire Riser cabinets pre encap -
24:10 OK to encap, all 3 FR cabinets
perform photo doc encap during clearance
testing 5/8/10.
communicate w/ HTI WEney and JLS GS via email
to coordinate meeting at 10 AM 5/8/10 to
perform testing of containments.
5/8/10 9:00 to 1:00 clearance testing, COC, lab transm

Signature [signature] Date 5/7/10

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 1/3/11
	LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185
	LCD REPS: TM1 ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 19 Floor ____ Floor 5 Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM ____ LBP ____ Other ____
LCD Project # -Task	**2372.0** 2 **-572; SOW** 5.0	**Description:** Containments 19	
LCD Project # -Task	**2372.0** 2 **-572; SOW** 6.0	**Description:** meeting Halon Floor 5	
LCD Project # -Task	**2372.0** ____ **-572; SOW** ____	**Description:** ____	

CONTAINMENT INFORMATION

1. Floor Occupied ____ Floor Vacant ✓
2. Containments: a) 19N b) 1917 c) ____ d) ____ e) ____ f) ____
3. Type of Containment: NPE 19N Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage 19N 1Stage 1917 Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes 19N No ____ Strip Chart Record: Yes 19N No ____ Adequate Pressure: Yes 19N No ____
6. Containment Entry Log: Yes 19N No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes 19N No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes 19 No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior 19N Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep ____ Removal/Load Out ✓ Detail Clean ____ Encapsulation ____ Clearance Testing ____ Tear Down ____ DeMob ____

Phase Completion Visual Inspection: Prep ____ Removal ____ Encapsulation ____ Clearance ____ Tear Down ____

Summary: Safety meeting 7-8
19N continue scraping adhesive NE area
1917 - No activity
Floor 5 Halon Training 10:30

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled —

On-Site Visitors: 1. ____ 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 1/3/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits 1 Gloves (pairs) 1 Respirator filters: — Misc: —

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name/Location: _____

Notes

Shift 7 - 3:30 JLS Safety meeting 7:8 offsite
continue adhesive removal (floor) From NW to NE at
perimeter E-W hall and cubicles then lift furniture, remove carpet
observe & photo doc conditions and procedures.
10:30 Halon Training for Floor 5 Containment w/
JLS and HTI provided by DPM Vendor - 1 hour
10:30 Containment 1917 ~~begins~~ pre-abatement visual
inspection - OK to begin abatement (after lunch)
11:30 - complete Floor 5 meetings: Halon and work in
computer Server Rooms.
12:00 work continues in 19 North - lifting cubicles and
removing carpet strips and scraping adhesive.
Work begins in 1917 removing carpet
12:20 Carpet Removal 1917 complete - begin bagout
and follow w/ adhesive scraping.
1400 begin wipe down 1917
lift cubicles and scrape adhesive / carpet strips
removal continues 19 N.
1500 final wipe down 1917 tentative final visual - pre-clearance
today 1917 - not possible - additional wet
wipe underway AND will continue tomorrow.
1530 Shift completed - 19N 2/3 of cubicle lifting
and removal of carpet strips w/ adhesive-scraping
is completed - resume tomorrow.

Signature [signature] Date 1/3/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 1/24/11 ✓
	LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185
	LCD REPS: TM/ ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day____ Swing ✓ Weekend/Holiday____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor____ Floor____ Floor____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0 2 -572; SOW 4.0**	**Description:** Supp WDA	
LCD Project #	**2372.0____-572; SOW _____**	**Description:**	
LCD Project #	**2372.0____-572; SOW _____**	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied _____ Floor Vacant ✓
2. Containments: a) _____ b) _____ c) _____ d) _____ e) _____ f) _____
3. Type of Containment: NPE_____ Mini_____ Barrier Tape_____ Minor Procedures _____ N/A _____
4. Type of Decon: Shower_____ 2-Stage_____ 1Stage_____ Drop Sheet W/Vacuum_____ None_____
5. Manometer: Yes____ No____ Strip Chart Record: Yes ___ No ____ Adequate Pressure: Yes ____No ____
6. Containment Entry Log: Yes_____ No_____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes___ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes___ No ___
9. Negative Air Exhaust Location: Window_____ Shaft_____ Stairs_____ Interior _____ Exterior _____
10. Security: Owner ✓ Contractor ____ Private____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob____ Prep____ Removal/Load Out___ Detail Clean____ Encapsulation___ Clearance Testing___ Tear Down___ DeMob____

Phase Completion Visual Inspection: Prep_____ Removal_____ Encapsulation_____ Clearance_____ Tear Down_____

Summary: perform core rooms above ceiling inspection & testing

Waste: Non-Hazardous Construction Debris____ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil_____ Double 6 Mil_____ Barrel _____Drum_____ Box_____ Burrito Wrap_____ Labels _____ Other_____

Location of Dumpster: _____

Additional Worker PPE: Disposable Suit_____ Gloves _____Eye Protection____ Steel Toe____ Hard Hat____ Chem Apron____

Respirator: Half Face ____ Full Face ____ PAPR _____Supplied Air_____

Contractor Worker Exposure Monitoring Yes____ No_____ # Workers Sampled _____

On-Site Visitors: 1._____ 2._____ 3._____ 4._____

LaCroix Davis Project LOG
Date: 1/24/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits 1 Gloves (pairs) 12 Respirator filters: 2 Misc: –

LAB EXPENSES: Type/No. Samples collected: Tape 9 Bulk 4 Air

Laboratory Name/Location: EML P&K, W. Sacto

Notes

1300 prep for mobilization to BOE Floor 5
1500 floor 5 turn over
inspect Batteries in SERVER room w/ HTI, BPM, JLS
1600 perform above ceiling inspection core rooms

1400 break
2000 complete COC
21

Signature Thomas

Date 1/24/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 1/25/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TM/; AS ; _____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 4.0, ~~5.0~~	**Description:** supp. carpet WDA	
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied (Server) Floor Vacant ✓
2. Containments: a) Men's b) Women's c) ____ d) ____ e) ____ f) ____
3. Type of Containment: NPE____ Mini____ Barrier Tape____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower____ 2-Stage____ 1Stage ✓ Drop Sheet W/Vacuum____ None____
5. Manometer: Yes ✓ No____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ___
9. Negative Air Exhaust Location: Window____ Shaft____ Stairs____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob____ Prep ✓ Removal/Load Out ✓ Detail Clean____ Encapsulation___ Clearance Testing___ Tear Down___ DeMob____

Phase Completion Visual Inspection: Prep____ Removal____ Encapsulation____ Clearance____ Tear Down____

Summary: Prep 3 containments - men's, women's & janitor Room
10:09 - approve containment - men's - begin removal
10:20 - approve containment - women's - begin removal

Waste: Non-Hazardous Construction Debris____ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil____ Double 6 Mil ____ Barrel ____Drum____ Box____ Burrito Wrap____ Labels ____ Other____

Location of Dumpster: ____

Additional Worker PPE: Disposable Suit____ Gloves ____Eye Protection____ Steel Toe____ Hard Hat____ Chem Apron____

Respirator: Half Face ____ Full Face ____ PAPR ____Supplied Air____

Contractor Worker Exposure Monitoring Yes____ No____ # Workers Sampled ____

On-Site Visitors: 1.____ 2.____ 3.____ 4.____

LaCroix Davis Project LOG
Date: 1/25/11

PERSONAL EXPENSES:

Hotel: ✓ x2 Per Diem: ✓ x 2 Travel: ✓ Destination: hotel to site & lab (1 of to site)

FIELD SUPPLIES: PPE: Suits 1111111 Gloves (pairs) 11 Respirator filters: 2 Misc: filter tubes = AS

LAB EXPENSES: Type/No. Samples collected: Tape 10 Bulk _____ Air _____

Laboratory Name/Location: EML P&K, W. Secto

Notes

7 JLS shift 7 - 5:30
begin prep men's, women's; janitor
10:30 prep completed men's & women's - removal begins
12:00 begin carpet inspection w/HTI - SM
removal of cabinet women's and men's - inspection AS
prep continues janitor room - ok removal - inspection AS
14:00 complete carpet inspection
inspections of containments ongoing (AS) + (TMI)
16:50 inspection women's
men's containment expansion to include water fountain above ceiling
Review lab results - ceilings in Men's & Women's = Mold
removal of GB at stained area
17:30 sample COC

Signature [illegible] Date 1/25/11

LaCroix Davis LLC
Building & Environmental Forensics

PROJECT LOG **DATE:** 1/26/11

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-1185

LCD REPS: TM; AS; ____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor 15 Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** 2 **-572; SOW** 4.0	**Description:** WDA	
LCD Project #	**2372.0** 2 **-572; SOW** 4.0	**Description:** 15 men's	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ (server) Floor Vacant ____
2. Containments: a) men's b) women's c) janitor d) 502 e) 503 f) ____
3. Type of Containment: NPE ✓ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage ✓ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ✓ No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep 502 503 Removal/Load Out a,b,c ✓ Detail Clean ____ Encapsulation ____ Clearance Testing ____ Tear Down ____ DeMob ____

Phase Completion Visual Inspection: Prep ____ Removal ____ Encapsulation ____ Clearance ____ Tear Down ____

Summary: work continues 3 containments - removal
men's containment expansion to include water fountain wall
women's - removal to include plenum wall, VMG
janitor - removal of water damaged materials ceiling & wall due to swollen joints & significant staining.
prep Rooms 502 & 503

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled 0

On-Site Visitors: 1. Mary Hoy DGS 2. Ken Firchau BPM 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 1/26/11

PERSONAL EXPENSES:

Hotel: ✓x2 Per Diem: ✓x2 Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits HH Gloves (pairs) HH Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air 5

Laboratory Name/Location: EML P&K, W. Sacto

Notes

7 to 5:30 shift
JLS continues removal work in men's, women's & janitor room
main containment expansion to include water fountain south
women's expands to VMG on plenum WEST wall
janitor include damaged (stained) surfaces.
JCD continues observation & photo doc 3 containments.
JLC onsite for observation and weekly construction meetings
CC onsite for weekly construction meetings.
14:00 removal completed Janitor Room - perform pre encap inspection
14:15 and photo doc - water fountain stain at cove base - removed GB
14:45 removal completed Men's and water fountain containment
detail cleaning underway in men's & women's containments
prep containments 502 and 503 ongoing
15:00 encap completed Janitor Room
detail cleaning continues men's & women's.
collect air samples re: floor 5 room 529
16:30 prep ongoing rooms 502 & 503 - setup decon units & HEPA's
detail cleaning continues men's & women's
17:10 Room 503 containment prep completed - OK removal 1/27/11 7AM
janitor room final wipe completed - setup testing 1/27/11 PM w/HTI
17:30 shift completed
18:00 perform visual inspection floor 15 men's handicap for BPM
sample COC and delivery to lab.

Signature Theonda Date 1/26/11

LaCroix Davis LLC
Building & Environmental Forensics

PROJECT LOG **DATE:** 1/27/11

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-1185

LCD REPS: TML; ____; ____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 4.0	**Description:** WDA	
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ____ Floor Vacant ____
2. Containments: a) 502 b) 503 c) Men's d) Women's e) janitor f) 5B
3. Type of Containment: NPE ✓ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage ✓ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ✓ No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep 5B ✓ Removal/Load Out 502, 503 ✓ Detail Clean 502, 503 men's, women's ✓ Encapsulation women's ✓ Clearance Testing janitor ✓ Tear Down ____ DeMob ____

Phase Completion Visual Inspection: Prep ✓ Removal ✓ Encapsulation ✓ Clearance ✓ Tear Down ____

Summary: Janitor Room - clearance testing PM
502, 503, removal - detail clean, encap
5B removal - detail clean
5C removal
men's, women's - detail clean, encap

Waste: Non-Hazardous Construction Debris ____ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ____ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: ____

Additional Worker PPE: Disposable Suit ____ Gloves ____ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ____ Full Face ____ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ____ # Workers Sampled ____

On-Site Visitors: 1. ____ 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 1/27/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: Sato & lab

FIELD SUPPLIES: PPE: Suits IIII Gloves (pairs) IIII Respirator filters: — Misc: ✓

LAB EXPENSES: Type/No. Samples collected: Tape 1 Bulk _____ Air 4

Laboratory Name/Location: EML P&K

Notes

1-5:30 shift
JLS continues detail cleaning women's & mens
1:45 begin removal Rm 503 and 502
collect sample 503 West at cove base, inspect 502
8:10 pre encap inspection women's ✓
prep begins 5B and 5C
8:30 Sampled COC and delivery to lab.
10:20 review lab report - Mold - discuss w/JLS for removal of GB
11:45 prep for Vehicle Room Clearance
meet HTI for sampling to 13:00
lab coc and delivery to lab AM
13:00 inspect 5B containment removal - & photo doc
14:20 Pre encap inspection men's
1447 Follow w/ PRO encap in Room 503
15:05 Removal inspection Room 5C & photo doc to break 154
16:00 Removal continues 5B
Detail cleaning underway 5B
Encap underway Men's Restroom/NW to 16:45 test Friday PM
Detail cleaning completed 502 and 503
1700 women's post encap & final wipe completed - testing Friday PM
Room 502 testing Friday PM Room 503 testing Friday PM
prep begins North Quadrant - carpet
discuss w/HTI & JLS - SW area (529) air testing and HEPA Vac
cubicle 63 + radius pending lab report.
Removal below ceiling 5C completed - cleanup continue Friday
17:30 shift complete

Signature _____ Date 1/27/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 1/28/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TM ; CC ; ____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 4.0	**Description:** WDA	
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Server Floor Vacant ____
2. Containments: a) 5B b) 5C c) 502, 503 d) men's e) women's f) janitor
3. Type of Containment: NPE ✓ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage ✓ Drop Sheet W/Vacuum ✓ None ____
5. Manometer: Yes ✓ No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep 5A Removal/Load Out 5C Detail Clean 5B, 5C Encapsulation 5B Clearance Testing women's 502 Tear Down Jan DeMob ____

Phase Completion Visual Inspection: Prep ____ Removal ____ Encapsulation ____ Clearance ____ Tear Down ____

Summary:
5B - detail cleaning
5C - removal plenum
men's - testing PM
women's testing PM
502, 503 testing PM
janitor - teardown
North Quad - prep.

Room 529 discuss prep
(storage 5A, SE stairwell & adjacent hall
Floor 4 storage 4A - discuss)
inspect cove base 5D, 506, 507
inspect ETE's

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled 0

On-Site Visitors: 1. Mary Hoy 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 1/28/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: Site & lab

FIELD SUPPLIES: PPE: Suits III Gloves (pairs) III Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape 10 Bulk 1 Air 21

Laboratory Name/Location: _____

Notes

7 to 5:30 shift
detail cleaning continues Room 5B
removal above ceiling begins Room 5C
clearance testing midshift men's, women's, 502, 503
observe 5C removal & photo doc conditions & procedures a.c.
inspect cove base 5D, NE fountain, ETE East and ETE West
10:30 pre encap visual Room 5C OK testing Monday 1/31/11
12:00 perform clearance testing women's & Room 502
13:00 sample COC and c/ delivery to lab.
inspect Removal Room 5C
meet w/ Greg S re: 5A and core hall containment design.
meet w/ Greg S and Mary H. re 529 prep - HEPA vac cube 63
14:20 perform clearance testing men's/fountain and Room 503 containments
15:30 sample COC and deliver to lab
report clearance results

Signature [signature] Date 1/28/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** **DATE:** 1/31/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TM1 ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) 5B b) 5C c) 5A d) Men's e) 503 f) Women's 502
3. Type of Containment: NPE ____ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage ____ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ____ No ____ Strip Chart Record: Yes ____ No ____ Adequate Pressure: Yes ____ No ____
6. Containment Entry Log: Yes ____ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ____ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ____ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ____ Exterior ____
10. Security: Owner ____ Contractor ____ Private ____ 24 hour ____ Secure Building ____

SUMMARY OF ACTIVITIES

Mob ____ Prep ____ Removal/Load Out ____ Detail Clean 5C Encapsulation 5C Clearance Testing a Tear Down f DeMob ____

Phase Completion Visual Inspection: Prep 5A Removal 5A Encapsulation ____ Clearance ____ Tear Down ____

Summary:

finish detail cleaning and encap in 5C Containment
perform clearance testing in 5B Containment

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. K. Firchau - DGS 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 1/31/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits 11 Gloves (pairs) 11 Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air 4.

Laboratory Name/Location: EML P&K

Notes

7-5:30 shift
8:30 perform 5B clearance testing w/HTI to 9:25
Sample COC
9:30 perform 5A & Hall containment prep inspection - JLS will install flex ducts to fire control equipment area. OK remove
10:00 Begin encap 5C
11:00 encap 5C complete - detail cleaning 5A / to lab w/ 5B sea
12: Continue detail 5A and prep North Quadrant & 506
Tear down 502, 503 and wash, prep 500 & North Quad
Continues
14:48 pre encap inspection 5A - photo doc conditions
14:59 Removal activities 506 - photo doc procedures & conditions
15:20 prep Continues. North Quadrant to 15:30 - break
15:45 detail cleaning continues 506 - prep continues North Quad
Encap. 5A -
16:30 Encap 506 -
North Quad prep continues.
16:45 discuss clearance testing 5A, 5C, 506 w/ HTI 2/1/11
tentative start time 11:00AM to allow SD analytical vs. WH
prep North Quad continues to 17:30

Signature [signature] Date 1/31/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 2/1/11
	LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TMI ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Floor 5 Containments	
LCD Project #	**2372.0** 2 **-572; SOW** 4.0	**Description:** Floor 5 Supp WDA	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) 5C b) 506 c) 5A d) N. Quad e) ____ f) ____
3. Type of Containment: NPE ____ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage ____ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ____ No ____ Strip Chart Record: Yes ____ No ____ Adequate Pressure: Yes ____ No ____
6. Containment Entry Log: Yes ____ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ____ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ____ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ____ Exterior ____
10. Security: Owner ____ Contractor ____ Private ____ 24 hour ____ Secure Building ____

SUMMARY OF ACTIVITIES

Mob ____ Prep d Removal/Load Out ____ Detail Clean ____ Encapsulation ____ Clearance Testing a b c Tear Down ____ DeMob ____

Phase Completion Visual Inspection: Prep ____ Removal ____ Encapsulation ____ Clearance a,b,c Tear Down ____

Summary: perform clearance testing for containments 5C, 5A and 506 core, basecheck, 518, 522 and NW core hall (potential flood event that impacted 5C, 506, 518)

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ____ Gloves ____ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ____ Full Face ____ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ____ # Workers Sampled ____

On-Site Visitors: 1. B. Contreras - BOE 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/1/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits _____ Gloves (pairs) _____ Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape 111 (Standard) Bulk _____ Air 7 (SD)

Laboratory Name/Location: EML P&K

Notes

shift 7 to 5:30
prep North Quadrant continues
clearance testing 5A, 5C, 506
8 cove base inspection Rooms 518, 522 and 513 (vinyl tile areas)
9:10 meet w/ HTI re: testing time = 11:00
meet w/ JLS-TW re: inspection chamber design for Server Room.
11:00 Perform clearance testing 5A, 5C and 506 contaminants (SD ~~FA~~?)
12:30 COC and deliver samples to lab (Prep ongoing N Quad)
13:30 Break prep continues N Quad
1645 prep continues North Quadrant. to 17:30
<discussion re: vending machine w CC>

Signature [signature] Date 2/1/11

LaCroix Davis LLC
Building & Environmental Forensics

PROJECT LOG **DATE:** 2/2/11

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-1185

LCD REPS: TMJ; CC; ____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Floor 5 Containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) N. Quad b) 504 c) ____ d) ____ e) ____ f) ____
3. Type of Containment: NPE ____ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage ____ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ____ No ____ Strip Chart Record: Yes ____ No ____ Adequate Pressure: Yes ____ No ____
6. Containment Entry Log: Yes ____ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ____ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ____ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ____ Exterior ____
10. Security: Owner ____ Contractor ____ Private ____ 24 hour ____ Secure Building ____

SUMMARY OF ACTIVITIES

Mob ____ Prep ✓ Removal/Load Out ____ Detail Clean ____ Encapsulation ____ Clearance Testing ____ Tear Down 506 5C 5A DeMob ____

Phase Completion Visual Inspection: Prep ____ Removal ____ Encapsulation ____ Clearance ____ Tear Down ✓

Summary: prep 504
prep N. Quadrant - am complete cubicles then begin ceiling

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil • Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ____ Gloves ____ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ____ Full Face ____ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled 0

On-Site Visitors: 1. ____ 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/2/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits _____ Gloves (pairs) _____ Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name/Location: _____

Notes

shift 7-5:30
Continue prep cubicles North Quadrant AM to Lunch Break
prep 504
teardown containments 5A, 5C and 506
9:30 weekly construction meetings prep cubicles continues to break
11:00-11:45 break begin installation of ceiling poly + window poly.
from NW barrier toward NE punchout windows (Sawtooth)
18:00 meet w/ JLS and HTI to wrap vending machine w/ double plastic
and move to exterior of bldg at SW Garage near rollup door

Signature Thomas

Date 2/2/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 2/3/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TMT ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** floor 5 containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) 504 b) N+E (512) c) ____ d) ____ e) ____ f) ____
3. Type of Containment: NPE ✓ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage ✓ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ✓ No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep ✓ Removal/Load Out ✓ Detail Clean ____ Encapsulation ____ Clearance Testing ____ Tear Down ____ DeMob ____

Phase Completion Visual Inspection: Prep 504, ____ Removal ____ Encapsulation ____ Clearance ____ Tear Down ____

Summary:

complete prep Room 504 and perform removal/loadout
continue prep North Quadrant - ceiling + decon + Diff Pressure

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. ____ 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/3/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits 111 Gloves (pairs) 111 Respirator filters: 2 Misc: —

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name/Location: _____

Notes

shift 7 - 5:30
complete prep 504 7 to 7:30
continue prep North Quadrant (512, 508, 509, 510, 511, 514, 514A)
8:30 discuss F15 plumbing repair (major wall containment) men's handicap
w/ JLS GS and contact HTI for sign off.
10:00 prep complete N. Quad OK removal
removal begins 504 and N. Quad.
observe procedures and conditions
VMG on 511 side of 504 too!
11 - 11:45 Break
Continue carpet removal N. Quad - also →
Remove GB in Rooms 511 and 509 (South wall opposite 504 & 506)
then perform cove base removal/inspection to ID VMG for
additional GB removal locations.
504 bagout then detail clean proceeds
(13:30 break) all GB w/ stains in 511 and 509 completed
514 (East wall and ½ of (South at sink
½ exterior in 512) and some of exterior in 512)
Cove base inspection completed - no additional stains
carpet removed NW to NE
removal continues NE to SE
14:00 Continue observation & photo doc N Quad - GB removal
continues at SE PO #1 - VMG on sill bottom surface Jamb No stain
Bagging debris and load out N. Quad. to 17:30
15:50 504 detail cleaning decon completed

Signature Sheron Dc Date 2/3/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** **DATE:** 2/4/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TMI ; CV ; ____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 4.0	**Description:** Server WDA	
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) N. Quad b) Server c) ____ d) ____ e) ____ f) ____
3. Type of Containment: NPE N.Quad Mini Server Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ____ 1Stage N Quad Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ✓ No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ✓ Prep ✓ Removal/Load Out ____ Detail Clean ____ Encapsulation ____ Clearance Testing ____ Tear Down ____ DeMob ____

Phase Completion Visual Inspection: Prep Server Removal ____ Encapsulation ____ Clearance ____ Tear Down ____

Summary: N. Quadrant - continue bagging/load out and floor adhesive scrape

Server Room: inspection and SE Punch Out window

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled ____

On-Site Visitors: 1. ____ 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/4/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: Site & lab

FIELD SUPPLIES: PPE: Suits _____ Gloves (pairs) _____ Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name/Location: _____

Notes

7 to 5:30 Floor 5
North Quadrant: continue carpet bagging and loadout ongoing
SERVER ROOM: perform supplemental WDA ongoing to 11:00
prep SE Punch Out Windows. to 11:00 completed
continue detail cleaning TO 15:
WDA continues to 17:15
N. Quad: loadout and adhesive scraping continues to 17:30

Signature [signature] Date 2/4/11

LaCroix Davis LLC
Building & Environmental Forensics

PROJECT LOG **DATE:** 2/5/11

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-1185

LCD REPS: TMI ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ___ Weekend/Holiday ✓
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ___ Floor ___ Floor 15
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Floor 5 Containments	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ___
2. Containments: a) N. Quad b) ___ c) ___ d) ___ e) ___ f) ___
3. Type of Containment: NPE ✓ Mini ___ Barrier Tape ___ Minor Procedures ___ N/A ___
4. Type of Decon: Shower ___ 2-Stage N. Quad ✓ 1Stage ✓ Drop Sheet W/Vacuum ___ None ___
5. Manometer: Yes ✓ No ___ Strip Chart Record: Yes ✓ No ___ Adequate Pressure: Yes ✓ No ___
6. Containment Entry Log: Yes ✓ No ___
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ___
9. Negative Air Exhaust Location: Window ___ Shaft ___ Stairs ___ Interior ✓ Exterior ___
10. Security: Owner ✓ Contractor ___ Private ___ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ___ Prep ___ Removal/Load Out ✓ Detail Clean ___ Encapsulation ___ Clearance Testing ___ Tear Down ___ DeMob ___

Phase Completion Visual Inspection: Prep ___ Removal ___ Encapsulation ___ Clearance ___ Tear Down ___

Summary: remove floor adhesive -

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ___ Hazardous Waste Manifest ___

Container: 6 Mil ___ Double 6 Mil ✓ Barrel ___ Drum ___ Box ___ Burrito Wrap ___ Labels ___ Other ___

Location of Dumpster: Floor 1 SW

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ___ Steel Toe ___ Hard Hat ___ Chem Apron ___

Respirator: Half Face ✓ Full Face ✓ PAPR ___ Supplied Air ___

Contractor Worker Exposure Monitoring Yes ___ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. ___ 2. ___ 3. ___ 4. ___

LaCroix Davis Project LOG
Date: 2/5/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits // Gloves (pairs) // Respirator filters: ____ Misc: ____

LAB EXPENSES: Type/No. Samples collected: Tape ____ Bulk ____ Air ____

Laboratory Name/Location: EML P&K

Notes

shift 7-5:30
continue scraping adhesive NE to SW - first pass
rebuild all completed containments underway -
server room - no access Sat/Sun complete WDA Monday
and begin removal 516 E
PM - lifting cubicles to remove carpet strips - clean and wrap
cubicle pads - scrape and wipe floors beneath cubicle
partitions/pads - moving from SE to NE to 15:30
General cleaning, cracks, decon underway.
15:45 moving toward NE to NW. cubicles, carpet strips etc.
Additional cubicles remain for Sunday shift at NW area

Signature [signature] Date 2/5/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 2/6/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TMI ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ___ Weekend/Holiday ✓
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ___ Floor ___ Floor ___
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Floor 5 Containments	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ___
2. Containments: a) N. Quadrant b) ___ c) ___ d) ___ e) ___ f) ___
3. Type of Containment: NPE___ Mini___ Barrier Tape___ Minor Procedures ___ N/A ___
4. Type of Decon: Shower___ 2-Stage ✓ 1Stage___ Drop Sheet W/Vacuum___ None___
5. Manometer: Yes ✓ No___ Strip Chart Record: Yes ✓ No ___ Adequate Pressure: Yes ✓ No ___
6. Containment Entry Log: Yes ✓ No___
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ___
9. Negative Air Exhaust Location: Window___ Shaft___ Stairs___ Interior ✓ Exterior ___
10. Security: Owner ✓ Contractor ___ Private___ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob___ Prep___ Removal/Load Out ✓ Detail Clean ✓ Encapsulation___ Clearance Testing___ Tear Down___ DeMob___

Phase Completion Visual Inspection: Prep___ Removal___ Encapsulation___ Clearance___ Tear Down___

Summary: continue removal of carpet and adhesive North Quadrant.

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ___ Hazardous Waste Manifest ___

Container: 6 Mil___ Double 6 Mil ✓ Barrel ___ Drum___ Box___ Burrito Wrap___ Labels ___ Other___

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection___ Steel Toe___ Hard Hat___ Chem Apron___

Respirator: Half Face ✓ Full Face ✓ PAPR ___ Supplied Air___

Contractor Worker Exposure Monitoring Yes___ No ✓ # Workers Sampled Ø

On-Site Visitors: 1.___ 2.___ 3.___ 4.___

LaCroix Davis Project LOG
Date: 2/6/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits 2 Gloves (pairs) 2 Respirator filters: ____ Misc: ____

LAB EXPENSES: Type/No. Samples collected: Tape — Bulk — Air —

Laboratory Name/Location: —

Notes

shift 7:00 to 13:30
JLS continues cleaning floor in N. Quadrant
removal of carpet strips and adhesive under cubicles NW area
cracks and floor scrubbing w/ pads all areas
SE toward NE and then toward NW
cracks will follow mopping floors
▷ work will continue Monday NW to NE final
cracks and wipe all surfaces.

Signature [signature] Date 2/6/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 2/7/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TML ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ___ Weekend/Holiday ___
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ___ Floor ___ Floor ___
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ___
2. Containments: a) N. Quad b) Server P.O.2 c) Server 516E d) ___ e) ___ f) ___
3. Type of Containment: NPE ✓ Mini ___ Barrier Tape ___ Minor Procedures ___ N/A ___
4. Type of Decon: Shower ___ 2-Stage ✓ 1Stage ___ Drop Sheet W/Vacuum ___ None ___
5. Manometer: Yes ✓ No ___ Strip Chart Record: Yes ✓ No ___ Adequate Pressure: Yes ___ No ___
6. Containment Entry Log: Yes ✓ No ___
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ___
9. Negative Air Exhaust Location: Window ___ Shaft ___ Stairs ___ Interior ✓ Exterior ___
10. Security: Owner ✓ Contractor ___ Private ___ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ___ Prep ✓ Removal/Load Out ✓ c Detail Clean ✓ a Encapsulation ___ Clearance Testing b Tear Down ___ DeMob ___

Phase Completion Visual Inspection: Prep ___ Removal ___ Encapsulation ___ Clearance ___ Tear Down ___

Summary: final detail clean - North Quadrant
server Room 515 - SE Punch out 2 clearance testing AM
server 516 East wall - prep, removal
server 515 and 516 continue visual inspection

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ___ Hazardous Waste Manifest ___

Container: 6 Mil ___ Double 6 Mil ✓ Barrel ___ Drum ___ Box ___ Burrito Wrap ___ Labels ___ Other ___

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ___ Steel Toe ___ Hard Hat ___ Chem Apron ___

Respirator: Half Face ✓ Full Face ✓ PAPR ___ Supplied Air ___

Contractor Worker Exposure Monitoring Yes ___ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. Mary Hoy DGS 2. ___ 3. ___ 4. ___

LaCroix Davis Project LOG
Date: 2/7/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits 11 Gloves (pairs) 11 Respirator filters: ____ Misc: ____

LAB EXPENSES: Type/No. Samples collected: Tape 2 Bulk ____ Air 4

Laboratory Name/Location: EML P&K W. Sacto

Notes

Shift 700 to 530
continue detail cleaning North Quadrant -
continue server room work
✓ • perform clearance testing in SE Punch out 2 containm
11:55 ✓ • construct containment 516 East wall
8:00 ✓ • Continue WDA -
8:30 ✓ • discuss carpet at 2 entrances to server Rooms
Test
11:00 perform Final visual North Quadrant W/ HTI
(Lunch) conditions pass - No visible dust OK testing
11:50 prep begins Room 521
11:55 prep inspection SERVER 516 East wall containment - OK
12:00 crew begins removal 516 East wall containment
issue clearance for server 515 SE PO2 containment
12:10 516 containment observe conditions and photo doc
wall cavity. collect 2 tape at suspect staining on 515
side of IFM - RUSH TAT
12:52 COC and deliver to lab for WH RUSH
sample results negative No Fungal Growth detected
all surfaces will be cleaned and painted in wall
15:30 Cavity. - then final cleaning
(Break) prep in Room 521 install poly ceiling underway
16:20 construct decon to 521
16:30 inspect encap 516 and discuss plan for Tuesday -
carpet at 515 East Entry is planned.
testing 516 E wall and North Quad at 12:00 is tentative

Signature [signature] Date 2/7/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** **DATE:** 2/8/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** CC ; TM ; _____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Floor 5 Containmen	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied _____ Floor Vacant _____
2. Containments: a) NW (521) b) 515 c) NE Quad 512 d) 516 e) 521 f) _____
3. Type of Containment: NPE_____ Mini_____ Barrier Tape_____ Minor Procedures _____ N/A _____
4. Type of Decon: Shower_____ 2-Stage ✓ 1Stage_____ Drop Sheet W/Vacuum_____ None_____
5. Manometer: Yes ✓ No____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No_____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes___ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes___ No ___
9. Negative Air Exhaust Location: Window_____ Shaft_____ Stairs_____ Interior ✓ Exterior _____
10. Security: Owner ✓ Contractor ____ Private____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob____ Prep ✓ Removal/Load Out ✓ Detail Clean ✓ Encapsulation___ Clearance Testing___ Tear Down___ DeMob____

Phase Completion Visual Inspection: Prep 521 ✓ Removal_____ Encapsulation_____ Clearance_____ Tear Down_____

shift start 0700

Summary: Complete prep of 521 and start carpet removal
Prep east entrance of 515 (server room) and remove carpet

Perform clearance testing of NE Quadrant
(CS) Perform clearance testing of 516 E. wall containment

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil_____ Double 6 Mil ✓ Barrel _____Drum_____ Box_____ Burrito Wrap_____ Labels _____ Other_____

Location of Dumpster: Floor 1 - SW garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection____ Steel Toe____ Hard Hat____ Chem Apron____

Respirator: Half Face ✓ Full Face ✓ PAPR _____Supplied Air_____

Contractor Worker Exposure Monitoring Yes____ No ✓ # Workers Sampled Ø

On-Site Visitors: 1._____ 2._____ 3._____ 4._____

LaCroix Davis Project LOG
Date: 2/8/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: Site & lab

FIELD SUPPLIES: PPE: Suits _____ Gloves (pairs) _____ Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air 12 521 (9) NQuad 515 (8) 2

Laboratory Name/Location: EML P&K

Notes

cc 0705 onsite - full floor visual walk around
cc 0845 completed prep visual inspection of 521; approved to proceed
cc 0930 completed prep visual inspection of 515 - East entrance
cc 0945 inspect cove base - Room 515 - East entrance
cc 1000 run Room 516 Clearance
TM1 onsite 12:50 - set up for testing North Quadrant containment and 515 NE Entry containments with HT1
14:50 - complete Chain of Custody and deliver to lab for WH RUSH turnaround - lab w/ analyze PM late.
15:45 check 521 Status carpet bagout underway
518/519 - prep
520 - prep
17:30 issue clearance memo for 515 NE Entry

21:30 receive lab results for North Quad
2/9/11 05:30 AM review and generate clearance memo
contact JLS w/ verbal OK teardown North

Signature Thomas Cc
Chris Cozpuz

Date 2/8/11
2/8/11

LaCroix Davis LLC
Building & Environmental Forensics

PROJECT LOG **DATE:** 2/9/11

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-1185

LCD REPS: TMI ; CC ; ____ **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:**	
LCD Project #	**2372.0** 2 **-572; SOW** ____	**Description:** weekly construction mtng	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) North Quad b) 521 c) 520 d) 518/519 e) 516 E f) 515 NE
3. Type of Containment: NPE a, b, Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage a, b, c 1Stage e, f, Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes a, b, c No ____ Strip Chart Record: Yes ____ No ____ Adequate Pressure: Yes ____ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep c, d, Removal/Load Out b, f Detail Clean b Encapsulation ____ Clearance Testing ____ Tear Down a, e, f DeMob ____

Phase Completion Visual Inspection: Prep c Removal b Encapsulation ____ Clearance ____ Tear Down ____

Summary: removal 521
tear down 512 (N & E Quadrants)
tear down 515 NE entry
tear down 516 E wall
prep 520 removal 520
prep 518/519

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. K. Fritchman 2. M. Hoy 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/9/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits 1 Gloves (pairs) ____ Respirator filters: ____ Misc: ____

LAB EXPENSES: Type/No. Samples collected: Tape ____ Bulk ____ Air ____

Laboratory Name/Location: ____

Notes

shift 7-5:30
teardown N&E Quadrant Containment
continue prep 520
continue removal 521
continue prep 518/519
teardown 515 NE entry
teardown 516 E wall
plan w/ BOE/JLS/HTI coordinate 515 main entry containment.
9:30 weekly construction meeting.
12:30 poly removal completed North Quad - load out continues
prep 520 complete OK removal
Removal/detail 521 continues
JLS plans 4A Friday PM. SE Stairs 2/18/11 - TW
12:45 Begin Removal 520, continue removal/detail 521/prep 5
13:45 inspect coved base North West Core hall w/ HTI from Elev. Lobby to West
inspect cove base South Core hall w/ HTI from Elev. Lobby to East
No suspect staining (these were suspect areas relative to floods)
14:15 prep 519 continues
1500 final detail cleaning 521
floor adhesive continues 520
prep continues 519-518
15:20 Perform final visual room 521 - OK testing 2/10/11
floor adhesive removal continues 520
prep 518/519 underway - start w/ HEPA vac portable furniture/cubicles in 518 and set up for South & East walls in 518.

Signature Thomas [illegible] Date 2/9/11

LaCroix Davis LLC
Building & Environmental Forensics

PROJECT LOG **DATE:** 2/10/11

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-1185

LCD REPS: TMI ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) 521 b) 520 c) 515 W. entry d) 519/518 e) ____ f) ____
3. Type of Containment: NPE a,b,c Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage a,b 1Stage c Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes a,b,c No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep c,d Removal/Load Out c Detail Clean b,c Encapsulation ____ Clearance Testing a Tear Down c DeMob ____

Phase Completion Visual Inspection: Prep c Removal c Encapsulation ____ Clearance ____ Tear Down ____

Summary: 520 - detail cleaning continues
521 - clearance testing
515 W. Entry - mini-containment all phases
519/518 prep continues

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. J. Sommerville 2. M. Hoy 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/10/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits III Gloves (pairs) III Respirator filters: ____ Misc: ____

LAB EXPENSES: Type/No. Samples collected: Tape ____ Bulk ____ Air 7 (3 WH 4 SD)

Laboratory Name/Location EML P&K ; W. Sacto

Notes

shift 7-5:30
4 active work areas:
521 clearance testing scheduled w/ HTI - Lunch
520 detail cleaning continues
519/518 (SW quad) prep continues
515 W. Entry all phases (mini-containment)
JLS has crew working in 3 areas
8:15 meet w/ HTI LS re: access to 515 W entry West wall control panel = accep table
meet w/ HTI & JLS re: ramp threshold removal to access carpet at under.
9:00 Begin 515 W. Entry - 10 VMG on W. Wall at door 2 Stud bays -
starting on 517 side of framing this room w/ have suspect wall designat
similar to core walls (Will also apply to chiller at J20)
10:25 J. Sommerville and M. Hoy on-site to check on status.
meet w/ M. Hoy and provide current update.
515 W Entry cleaning wall cavity, encap, install new GD
scrape floor adhesive and final wipe down.
11:00 crew break except 515 W entry encap wall cavity
and perform final wipe continues to 11:30
11:30 (final visual 520 completed at 9:15 HTI ok)
12:00 coordinate w/ HTI for testing 515 W Entry - begin at 12
13:00 complete clearance testing - COC and samples to lab
13:30 samples logged in for W/H - (2 hr. turnaround)
Prep continues 519/518 - begin installing ceiling poly 18
15:00 lab data review - issue clearance memo HTI pending
prep continues 519/518. tear down and carpet 515.

Signature [signature] Date 2/

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 2/11/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TMI ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) 519/518 b) 520 c) 521 d) ____ e) ____ f) ____
3. Type of Containment: NPE ✓ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ✓ 1Stage ____ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ✓ No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep a Removal/Load Out a Detail Clean ____ Encapsulation ____ Clearance Testing b,c Tear Down ____ DeMob ____

Phase Completion Visual Inspection: Prep a Removal ____ Encapsulation ____ Clearance ____ Tear Down ____

Summary: final check prep 519 & 518 containment OK removal
clearance testing 520.
clearance testing 521
teardown poly 520 & 521

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ✓ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ✓ Full Face ✓ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. ____ 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/11/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits /// Gloves (pairs) /// Respirator filters: ____ Misc: ____

LAB EXPENSES: Type/No. Samples collected: Tape ____ Bulk ____ Air 6

Laboratory Name/Location: EML P&K, W. Sacto

Notes

shift 7-~~5:30~~ 3:30 per JLS
7:15 final pre-inspection 519/518 - OK removal
8:00 begin clearance testing 520 and 521 containments
(Meet w/ K. Firchau re: Fire Control Rm leak above plenum deck
dismist access - need ladder above ceiling & coord w/ remediation
crew removing carpet & wall materials
9:15 observe conditions in 519/518
(discuss project w/ Mary Hoy status update)
1000 deliver COC & Samples to lab
VMG in wall cavity along 518/519 East walls common to 517
opened and cleared. No work is currently planned in 517.
11: Break & continue bagout - lift cubicle furniture and
remove & scrape adhesive.
12 - observe conditions and photodoc.
518 - VMG is obvious on gypboard in wall cavity entire N/S wall continues
6' into room 519 - The impacted surface is Room 517 West wall
21' + 6' = 27' total observed VMG; Room 517 is 30' & Room 516 is not impacted
13 JLS will work to 3:30 then resume at 5:30 for swing shift 4A
continue lifting cubicles - removing carpet
some adhesive scraping and cleaning
wall cavities in 518.
18:30 shift completed - swing shift crew
begins removing poly-tech down 521 & 522
17:30 meet with JLS re: 4A swing shift work.

Signature [signature] Date 2/11/11

LaCroix Davis LLC
Building & Environmental Forensics

PROJECT LOG **DATE:** 2/14/11

LACROIX DAVIS LLC
3685 MT. DIABLO BLVD. SUITE 210
LAFAYETTE, CA 94549
TEL 925-299-1140 FAX 925-299-1185

LCD REPS: TMI ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ___ Weekend/Holiday ___
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ___ Floor ___ Floor ___
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	
LCD Project #	**2372.0** ___ **-572; SOW** ___	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ___
2. Containments: a) 519/518 b) 520 c) 521 d) ___ e) ___ f) ___
3. Type of Containment: NPE ✓ Mini ___ Barrier Tape ___ Minor Procedures ___ N/A ___
4. Type of Decon: Shower ___ 2-Stage ✓ 1Stage ___ Drop Sheet W/Vacuum ___ None ___
5. Manometer: Yes ✓ No ___ Strip Chart Record: Yes ✓ No ___ Adequate Pressure: Yes ✓ No ___
6. Containment Entry Log: Yes ✓ No ___
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ___
9. Negative Air Exhaust Location: Window ___ Shaft ___ Stairs ___ Interior ✓ Exterior ___
10. Security: Owner ✓ Contractor ___ Private ___ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ___ Prep ___ Removal/Load Out ✓ Detail Clean ✓ Encapsulation ✓ Clearance Testing ___ Tear Down 520 521 ✓ DeMob ___

Phase Completion Visual Inspection: Prep ___ Removal ✓ Encapsulation ✓ Clearance ✓ Tear Down ___

Summary: remove containment barriers 520 and 521
continue scraping adhesive 519/518 final detail & encap.

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ___ Hazardous Waste Manifest ___

Container: 6 Mil ___ Double 6 Mil ✓ Barrel ___ Drum ___ Box ___ Burrito Wrap ___ Labels ___ Other ___

Location of Dumpster: Floor 1 SW Garage

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection ___ Steel Toe ___ Hard Hat ___ Chem Apron ___

Respirator: Half Face ✓ Full Face ✓ PAPR ___ Supplied Air ___

Contractor Worker Exposure Monitoring Yes ___ No ✓ # Workers Sampled Ø

On-Site Visitors: 1. ___ 2. ___ 3. ___ 4. ___

LaCroix Davis Project LOG
Date: 2/14/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site

FIELD SUPPLIES: PPE: Suits / Gloves (pairs) / Respirator filters: — Misc: —

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name/Location: _____

Notes

7+0530 JLS shift
safety meeting to 8:00
crew continues teardown 520 and 521 containments
9:30 continue 519/518 detail cleaning floor and open 518
to view wall cavity. - No visible stains - cut/open to pop out.
1100 open and clean hull side debris
lunch break
11:45 continue cleaning flooring - remove decon caulk
scrape adhesive - wipe all surfaces, HEPA vac
encap and final drop down
15:00 work completed 1500 519/518 final visual OK
tentative testing 2/15/11 at ~15:00 w/ HTI

Signature [signature] Date 2/14/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 2/15/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TM ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Containments	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) 519/518 b) ____ c) ____ d) ____ e) ____ f) ____
3. Type of Containment: NPE ✓ Mini ____ Barrier Tape ____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower ____ 2-Stage ✓ 1Stage ____ Drop Sheet W/Vacuum ____ None ____
5. Manometer: Yes ✓ No ____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No ____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ____
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ____
9. Negative Air Exhaust Location: Window ____ Shaft ____ Stairs ____ Interior ✓ Exterior ____
10. Security: Owner ✓ Contractor ____ Private ____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ____ Prep ____ Removal/Load Out ____ Detail Clean ____ Encapsulation ____ Clearance Testing ✓ Tear Down ____ DeMob ✓

Phase Completion Visual Inspection: Prep ____ Removal ____ Encapsulation ____ Clearance ✓ Tear Down ____

Summary: begin removing equipment
PM clearance testing 519/518 + hall
mark stained fireproofing

Waste: Non-Hazardous Construction Debris ____ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil ____ Double 6 Mil ____ Barrel ____ Drum ____ Box ____ Burrito Wrap ____ Labels ____ Other ____

Location of Dumpster: ____

Additional Worker PPE: Disposable Suit ____ Gloves ____ Eye Protection ____ Steel Toe ____ Hard Hat ____ Chem Apron ____

Respirator: Half Face ____ Full Face ____ PAPR ____ Supplied Air ____

Contractor Worker Exposure Monitoring Yes ____ No ____ # Workers Sampled ____

On-Site Visitors: 1. ____ 2. ____ 3. ____ 4. ____

LaCroix Davis Project LOG
Date: 2/15/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits 1 Gloves (pairs) 1 Respirator filters: ____ Misc: ____

LAB EXPENSES: Type/No. Samples collected: Tape 1 Bulk 1 Air 6

Laboratory Name/Location: EML P&K, W. Sacto

Notes

Shift 7 - 3:30
demob excess equipment
mark stained fireproofing North and East 10 - 12:30
perform clearance testing. 519/518, 11:00
inspect N & E core hall above ceiling/sample COC & lab
clearance sample COC and deliver to lab
15:30 review lab reports - generate clearance memo and distribute. Call JLS & HTI contacts - verbal clearance.

Signature [signature] Date 2/15/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** **DATE:** 2/16/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TMI ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day ✓ Swing ____ Weekend/Holiday ____
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor ____ Floor ____ Floor ____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ✓ ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** containments	
LCD Project #	**2372.0** 2 **-572; SOW** 4.0	**Description:** WDT	
LCD Project #	**2372.0** ____ **-572; SOW** ____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant ____
2. Containments: a) 519/518 b) ____ c) ____ d) ____ e) ____ f) ____
3. Type of Containment: NPE____ Mini____ Barrier Tape____ Minor Procedures ____ N/A ____
4. Type of Decon: Shower____ 2-Stage____ 1Stage____ Drop Sheet W/Vacuum____ None____
5. Manometer: Yes____ No____ Strip Chart Record: Yes ___ No ____ Adequate Pressure: Yes ____No ____
6. Containment Entry Log: Yes____ No____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes___ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes___ No ___
9. Negative Air Exhaust Location: Window____ Shaft____ Stairs____ Interior ____ Exterior ____
10. Security: Owner ____ Contractor ____ Private____ 24 hour ____ Secure Building ____

SUMMARY OF ACTIVITIES

Mob____ Prep____ Removal/Load Out___ Detail Clean____ Encapsulation___ Clearance Testing___ Tear Down ✓ DeMob____

Phase Completion Visual Inspection: Prep____ Removal____ Encapsulation____ Clearance ✓ Tear Down____

Summary: core hall above ceiling inspection
mark stained surfaces above ceiling

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil____ Double 6 Mil ____ Barrel ____Drum____ Box____ Burrito Wrap____ Labels ____ Other____

Location of Dumpster: ____

Additional Worker PPE: Disposable Suit____ Gloves ____Eye Protection____ Steel Toe____ Hard Hat____ Chem Apron____

Respirator: Half Face ____ Full Face ____ PAPR ____Supplied Air____

Contractor Worker Exposure Monitoring Yes____ No____ # Workers Sampled ____

On-Site Visitors: 1.____ 2.____ 3.____ 4.____

LaCroix Davis Project LOG
Date: 2/16/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: Scte

FIELD SUPPLIES: PPE: Suits _____ Gloves (pairs) _____ Respirator filters: _____ Misc: _____

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air _____

Laboratory Name/Location: _____

Notes

VLS Shift 7 - 3:30 –
AM tear down containment + weekly construction meetings
PM perform above ceiling survey w/ HT (occupied SW core hallway)
observe tear down
9:30 weekly construction meeting
10:45 meet w/ MM and MH re: cafe deming/kitchen wall issues
1230 apply paint to stains above ceiling core hall & SW
1800 perform core hall inspection above ceiling

Signature [signature] Date 2/16/11

LaCroix Davis LLC Building & Environmental Forensics	**PROJECT LOG** DATE: 2/18/11 2/19/11 LACROIX DAVIS LLC 3685 MT. DIABLO BLVD. SUITE 210 LAFAYETTE, CA 94549 TEL 925-299-1140 FAX 925-299-1185 **LCD REPS:** TML ; ; **PAGE** 1 **OF** 2

Client	**Department of General Services (DGS)**	Contractor: **JLS Environmental**	Day____ Swing ✓ Weekend/Holiday ✓
Project	**Board of Equalization (BOE)**	Location(s):	Floor 5 Floor____ Floor____ Floor____
Building	**450 N Street, Sacramento CA**	Compound(s) of Concern	Mold ACM LBP Other
LCD Project #	**2372.0** 2 **-572; SOW** 5.0	**Description:** Containments	
LCD Project #	**2372.0**____**-572; SOW** _____	**Description:**	
LCD Project #	**2372.0**____**-572; SOW** _____	**Description:**	

CONTAINMENT INFORMATION

1. Floor Occupied ✓ Floor Vacant _____
2. Containments: a) W. E TE b) S.E. Stairs c) _____ d) _____ e) _____ f) _____
3. Type of Containment: NPE ✓ Mini ✓ Barrier Tape _____ Minor Procedures _____ N/A _____
4. Type of Decon: Shower_____ 2-Stage_____ 1Stage ✓ Drop Sheet W/Vacuum_____ None_____
5. Manometer: Yes ✓ No____ Strip Chart Record: Yes ✓ No ____ Adequate Pressure: Yes ✓ No ____
6. Containment Entry Log: Yes ✓ No_____
7. Containment and Decon maintained in accordance with accepted practices and procedures: Yes ✓ No ___
8. HEPA Fans and Vacuums have current aerosol challenge test sticker: Yes ✓ No ___
9. Negative Air Exhaust Location: Window_____ Shaft_____ Stairs_____ Interior ✓ Exterior _____
10. Security: Owner ✓ Contractor ____ Private____ 24 hour ✓ Secure Building ✓

SUMMARY OF ACTIVITIES

Mob ✓ Prep ✓ Removal/Load Out ✓ Detail Clean ✓ Encapsulation ✓ Clearance Testing___ Tear Down___ DeMob____

Phase Completion Visual Inspection: Prep ✓ Removal_____ Encapsulation_____ Clearance_____ Tear Down_____

Summary:

2/18 set up 2 containments - perform removal, cleaning, encap
2/19 perform clearance testing
2/15 wash stained fireproofing and GB above ceiling SW corr hall

Waste: Non-Hazardous Construction Debris ✓ Hazardous Waste ____ Hazardous Waste Manifest ____

Container: 6 Mil_____ Double 6 Mil ✓ Barrel _____Drum_____ Box_____ Burrito Wrap_____ Labels _____ Other_____

Location of Dumpster: Floor 1 SW

Additional Worker PPE: Disposable Suit ✓ Gloves ✓ Eye Protection____ Steel Toe____ Hard Hat____ Chem Apron____

Respirator: Half Face ____ Full Face ✓ ____ PAPR _____ Supplied Air_____

Contractor Worker Exposure Monitoring Yes____ No ✓ # Workers Sampled Ø

On-Site Visitors: 1._____ 2._____ 3._____ 4._____

LaCroix Davis Project LOG
Date: 2/18/11
2/19/11

PERSONAL EXPENSES:

Hotel: ✓ Per Diem: ✓ Travel: ✓ Destination: site & lab

FIELD SUPPLIES: PPE: Suits 2 Gloves (pairs) 2 Respirator filters: — Misc: —

LAB EXPENSES: Type/No. Samples collected: Tape _____ Bulk _____ Air 5

Laboratory Name/Location: EML P&K, W. Sacto

Notes

2/18
17:30 meet w/ HTI and JLS re: SOW
JLS begins prep work - completes SE Stairs at 20:00 (SW corr hall made above ceiling)
20:00 lunch break SE Stairs crew WETE 20:15
21:00 crew continues removal SE Stairs and cleaning WETE
21:15 WETE cleaning complete - OK encap followed by detail cleaning all surfaces.
SE Stairs removal 1° layer - minor stains on 2° requires cleaning prior to encap.
21:30 cleaning completed OK encap completed
detail cleaning all surfaces proceeds
22:30 detail cleaning completed -
collapse decon unit at SE Stairs for Egress overnight.

2/19
10:15 containment check - OK.
prep for clearance testing
contact JLS and HTI reps - go for 11 testing

12 sample coc and deliver to lab

review lab report - contact HTI and JLS
issue clearance memo

Signature [signature] Date 2/19/11