

RESOLUTION NO. 22-12

**A RESOLUTION AUTHORIZING ASBESTOS ABATEMENT
IN OLD POST OFFICE BUILDING**

WHEREAS, it has been determined that there is asbestos in the Old Post Office building around and on HVAC ducts which must be removed;

WHEREAS, Environmental Protection Associates is a qualified party to remove and abate the asbestos;

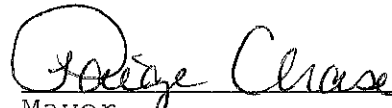
WHEREAS, Environmental Protection Associates has offered to perform the required work at a fee of \$7,151.00

IT IS, THEREFORE, by the City Council of Monticello, Arkansas resolved as follows:

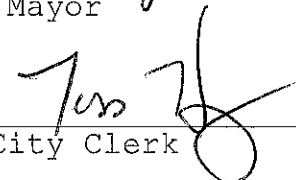
1. That the City is authorized to employ Environmental Protection Associates to remove and abate asbestos in the Old Post Office building around and on the HVAC ducts at a cost of \$7,151.00 to the City of Monticello.

(END OF RESOLUTION)

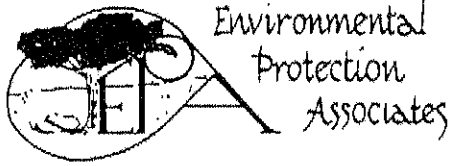
ADOPTED on this 26 day of January, 2022.



Mayor

Attested by: 

City Clerk



#9 Remington Cove
Little Rock, Arkansas 72204
Phone: 501-562-3818
Fax: 501-562-5701
Toll Free: 1-800-530-7706

FAX

To: Mayor Chase

From: Gary Nooner

Email: gary@clementsarchitects.com

Date: January 12, 2022

Fax:

Phone:

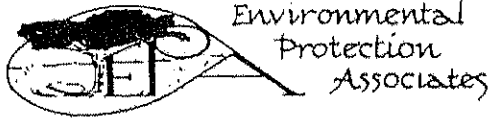
Pages: 5 Including cover sheet

Cell:

Re: Old Post Office
Monticello, AR

cc:

Comments



Environmental Protection Associates

#9 Remington Cove
Little Rock, Arkansas 72204
501-562-3818
Fax 501-562-5701

PROPOSAL

DATE: January 12, 2022

TO: Mayor Chase
City of Monticello
203 West Gaines Street
Monticello, AR 71655

PROJECT LOCATION: Old Post Office
Monticello, AR

Environmental Protection Associates proposes to provide the following scope of work:
Proper removal and disposal of asbestos containing duct insulation (approximately 310 sft)
Price includes filing a Notice of Intent with the Arkansas Department of Environmental Quality per regulation 21.
NOI requires a ten (10) working day waiting period before work may begin.
Project will take one day to complete.
Price includes third party clearance air sampling per ADEQ reg 21.


Owner's Responsibilities:
Remove all furnishings and stored items from the work area prior to our arrival onsite.
Provide power and water for the project.

For the Sum of: Seven thousand one hundred fifty-one dollars and no cents
\$7,151.00

For the Sum of:

For the Sum of:

Environmental Protection Associates propose to perform the scope of work and alternates under EPA, NESHAPS, AHERA, and State of Arkansas regulations.
Insurance: Provide Workmans Compensation, Automobile and Comprehensive General Liability Insurance.
CGL to include \$1,000,000 coverage for asbestos related acts specifically. *Other limits available.*
Project Documentation shall be provided including all paperwork concerning this project.

Respectfully submitted,


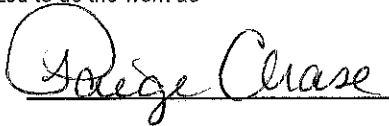
Gary Nooner
Project Coordinator

*This proposal may be withdrawn by EPA if not accepted within days.
Payment for invoices provided shall be made days from date of invoice.*

ACCEPTANCE OF PROPOSAL

The above proposal and its conditions is satisfactory and is hereby accepted. EPA is authorized to do the work as proposed and outlined above.

Date: 1-26-22

Signature: 

Signature: _____

Arkansas Department of Environmental Quality

ENVIRONMENTAL PROTECTION ASSOCIATES (EPA)

is a licensed

Asbestos Abatement Contractor

having qualified as required by law in accordance with the regulations adopted by the Arkansas Pollution Control and Ecology Commission's Regulation 21 pursuant to Arkansas Code Annotated §20-27-1001 et seq. relative to abatement of asbestos -containing material within the state of Arkansas.



License Number: 000020

Issue Date: 12/01/2021

Expire Date: 12/01/2022

A handwritten signature in cursive script, reading "Becky W. Keogh".

Becky W. Keogh
ADEQ Director

State of Arkansas
Commercial Contractors Licensing Board

ENVIRONMENTAL PROTECTION ASSOCIATES OF RUSSELLVILLE, INC.
9 REMINGTON COVE
LITTLE ROCK, AR 72204

ENVIRONMENTAL PROTECTION ASSOCIATES OF RUSSELLVILLE, INC.

This is to Certify That

_____ is duly licensed under the provisions of Ark. Code Ann. § 17-25-101 et. seq. as amended and is entitled to practice Contracting in the State of Arkansas within the following classifications/specialties:

- BUILDING
- (COMMERCIAL & RESIDENTIAL)
- SPECIALTY
- Asbestos
- Environmental General

This contractor has an unlimited suggested bid limit.

from April 23, 2021 until April 30, 2022 when this Certificate expires.
Witness our hands of the Board, dated at North Little Rock, Arkansas:



[Handwritten Signature]

CHAIRMAN

[Handwritten Signature]

SECRETARY

April 23, 2021 - dsa



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/22/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Sterling Seacrest Partners, Inc P O Box 16445 Little Rock AR 72231	CONTACT NAME: Grant Huddleston	PHONE (A/C, No, Ext): (501) 588-0857	FAX (A/C, No): (501) 251-1135
	EMAIL ADDRESS: ghuddleston@sspins.com		
INSURED Environmental Protection Associates of Russellville, Inc. 9 Remington Cove Little Rock AR 72204	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A:	Arch Specialty Insurance Company	21199
	INSURER B:	Lafayette Insurance	18295
	INSURER C:		
	INSURER D:		
	INSURER E:		

COVERAGES

CERTIFICATE NUMBER: 20-21 All Lines

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

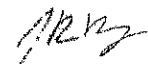
INSR LTR	TYPE OF INSURANCE	ADDL INSD	ISBRR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Blanket Contractual <input checked="" type="checkbox"/> XCU Included GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	12EMP2232801	12/31/2020	12/31/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$	
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	60521561	12/31/2020	12/31/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0	Y	Y	12EMX2232901	12/31/2020	12/31/2021	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	Y	EBWCC0015800	12/31/2020	12/31/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Pollution Incl Mold Professional Liability			12EMP2232801	12/31/2020	12/31/2021	Limit Per Incident 1,000,000 Aggregate 2,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

MUST ENDORSE INDV ADDITIONAL INSURED & WOS ON AUTO & WOS ON WC

The following applies when required in written contract or agreement: Certificate holder and owner are included as additional insureds on a primary and non-contributory basis with respect to General Liability (including completed operations), Auto Liability and Umbrella. Waiver of subrogation is provided on General Liability, Auto Liability, Umbrella and Workers Compensation.

CERTIFICATE HOLDER**CANCELLATION**

PROOF OF INSURANCE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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