

MDH/MPCA Clandestine Lab Contractors' Procedural Report

Note: This contractors' procedural report is for documenting assessment and cleanup of indoor/ structural contamination created by meth production and meth lab wastes. The Minnesota Pollution Control Agency posts a continuation of this Contractors' Procedural Report for outdoor cleanup guidance on their website <http://www.pca.state.mn.us/cleanup/meth.html> .

Table of Contents

General Site Description

- Sheet A: Property and Contact Identification
- Sheet B: Project Checklist
- Sheet C: Background Information
- Sheet D: Site Maps
- Sheet E: Building Floor Plan Sketches

Indoor Assessment

- Sheet F: Plumbing Cleanup
- Sheet G: Individual Room Descriptions
- Sheet H: Garage, Outbuilding, and Other Non-Occupancy Structures
- Sheet I: Forced Air Heating Cleanup
- Sheet J: Furnishing Disposal and Cleanup
- Sheet K: Appliance Disposal and Cleanup
- Sheet L: Confined Spaces Plan

Outdoor Assessment

See note above. If outdoor cleanup is conducted, go to <http://www.pca.state.mn.us/cleanup/meth.html> for additional sheets.

Final Project Report

- Sheet P: Final Project Report

Note: Each "sheet" or attachment will not be used for every remediation project. The local authority monitoring the project and/or the property owner paying for the remediation may use some discretion in deciding which portions of the report will be completed or required. This documentation is intended to provide a clear and accurate record of the assessment, cleanup and decision-making processes.

Clan Lab Contractors Procedural Report

Sheet A: Property and Contact Identification

MDH/MPCA Guidance Dated: **April 3, 2007**

Date Investigation Started _____

<p>Property Name (if business): Site Street Address: Nearest City: County: Latitude: Longitude: Date of Lab Discovery:</p>	<p>Local Authority Overseeing Cleanup Name: Agency: Mailing Address: City, State, Zip: Telephone: Email: FAX:</p>
<p>Property Owner/Other Client Name(s): Mailing Address: City, State, Zip: Telephone: Email: FAX:</p>	<p>Lead Criminal Investigator Name: Agency: Mailing Address: City, State, Zip: Telephone: Email: FAX:</p>
<p>Consultant/Contractor Contact: Project Manager: Firm: Mailing Address: City, State, ZIP: Telephone of Project Manager: Email: FAX:</p>	<p>Access Arrangements Name(s): Mailing Address: City, State, Zip: Telephone: Email: FAX:</p>

Clan Lab Contractors Procedural Report Sheet B: Project Checklist

(Contractor's Project Manager must circle a Y/N or complete every line)

Preliminary Tasks:

Contacted lead criminal investigator and requested police reports? Y / N
Comments _____

Gross Chemicals, filters, and glassware present?
Y / N
If Yes, call lead criminal investigator. Y / N
Comments _____

Contractor's Project Manager approved by local authority? Y / N
Comments _____

Worker / Owner (as required) given Methamphetamine Right-to-Know Training Y / N
Comments _____

General Site Description:

Sheet A: *Property and Contact Identification* completed? Y / N
Comments _____

Sheet C: *Background Information* collected? Y / N
Comments _____

Sheet D1: *Map to Site* and Sheet D2: *Site Map* completed? Y / N
Comments _____

Sheet E: *Building Floor Plan Sketches* completed? Y / N
Comments _____

Indoor Assessment:

Sheet F: *Plumbing Cleanup* described? Y / N
Comments _____

Sheet G: *Individual Room Descriptions* completed? Y / N
Comments _____

Did assessment include outbuildings? Y / N
Sheet H: *Garage, Other Non-Occupancy Structures* described? Y / N
Comments _____

Were forced air systems present? Y / N
Sheet I: *Forced Air Heating Cleanup* described? Y / N
Comments_____

Were furniture, carpet or other furnishings present? Y / N
Sheet J: *Furniture, Carpeting and Draperies Cleanup* described? Y / N
Comments_____

Were appliances present? Y / N
Sheet K: *Appliance Disposal and Cleanup* described? Y / N
Comments_____

Was attic, crawl space or other limited access confined area present? Y / N
Sheet L: *Confined Spaces Plan* completed? Y / N
Comments_____

Outdoor Assessment

Was a well(s) present on-site or within 250 ft. of cook or waste disposal site? Y / N
Sheet M: *Well Location and Testing* described? Y / N
Comments_____

Was a sanitary sewer/septic system present on the property? Y / N
Sheet N: *Septic and Drainfield Description and Testing* completed? Y / N
Comments_____

Were burn pits, burial or dumpsites present? Y / N
Sheet O: *Burn Pits, Burial Pits and Dump Sites?* Y / N
Comments_____

Project Completion Report

Sheet P: *Project Completion Report* completed? Y / N
Comments_____

Customized Cleanup

Does owner want to do a customized cleanup because he/she believes an area of the structure is not or lightly contaminated? Y / N
Comments_____

If Yes, submit Pre-Cleanup Sampling plan, and Work Plan (including this report completed as needed to describe proposed work) to local authority.

Clan Lab Contractors Procedural Report

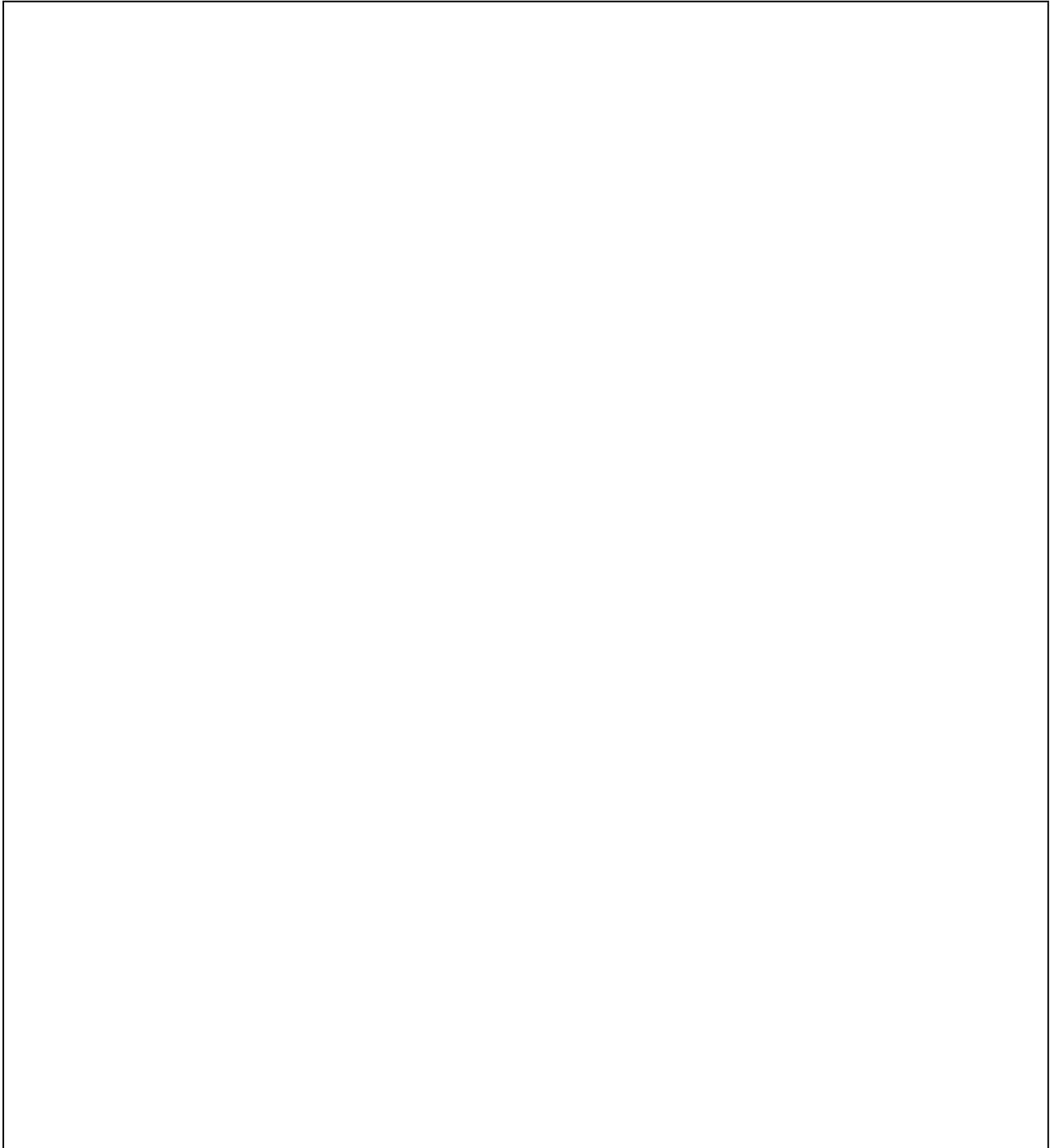
Sheet C: Background Information

Describe known or reported clandestine laboratory activity on the site (e.g., areas of meth cooking, date of last suspected cook (or suspect arrest date), law enforcement estimates of time meth operations existed, approximate quantities of meth produced, chemical location and amount disposed, and any lab apparatus, etc). Reference and attach appropriate available police reports:

Other observed contamination sources on the site, such as waste oil dumping, oil tanks, hobby or business chemical use, etc.

Clan Lab Contractors Procedural Report
Sheet D1: Map to site

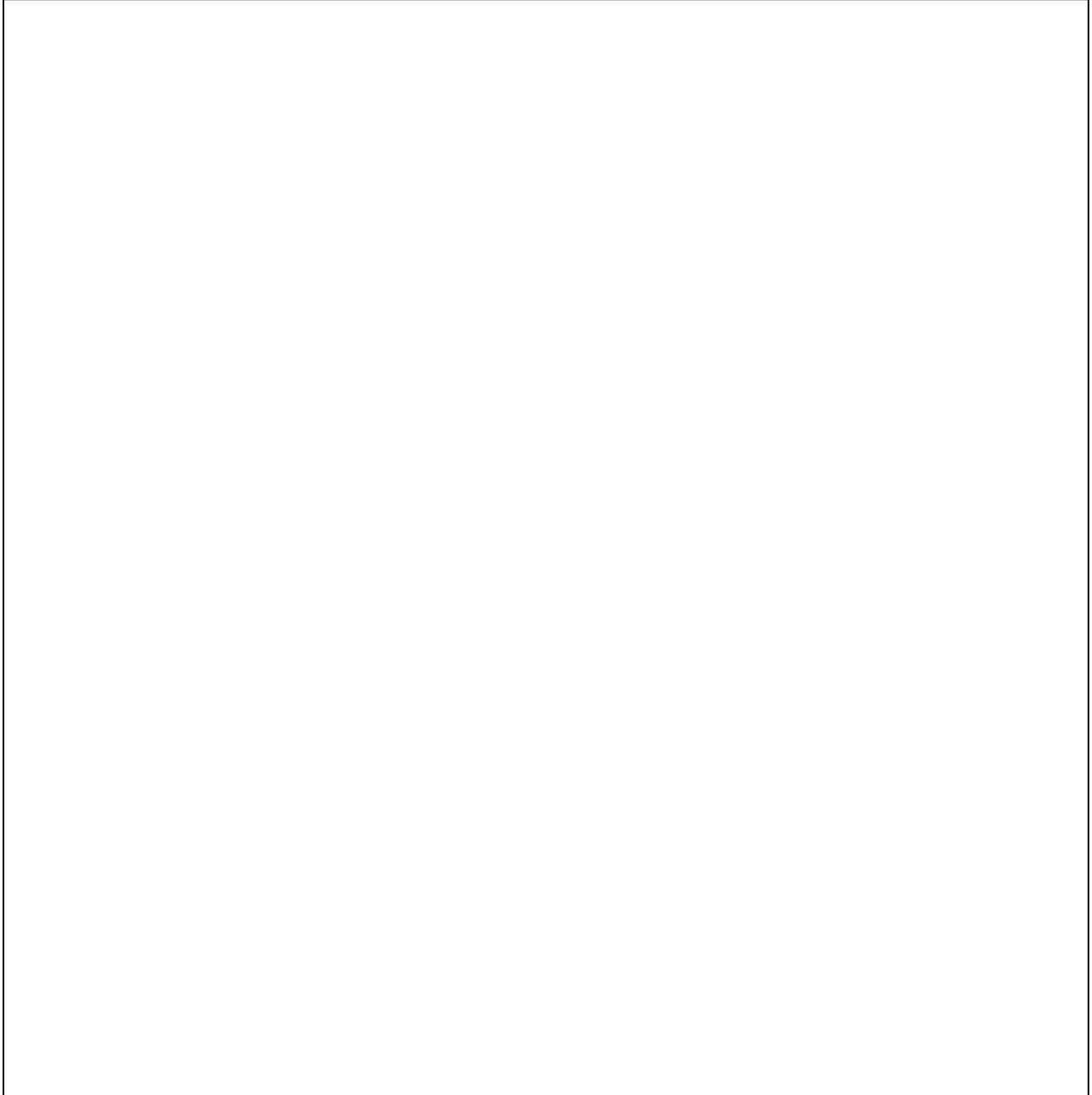
Show roads from nearest town, major surface water, north arrow, and other important features. Attach separate sheet if necessary.



Additional directions to site if necessary:

Clan Lab Contractors Procedural Report Sheet D2: Site Map

Site map: Sketch buildings, wells, septic tank/drainfield, burn or burial pits; arrows and distances to nearest occupancies and wells, and surface water in each direction; north direction arrow. Attach separate sheet if necessary. **Number buildings on this sketch** for use in later sheets.



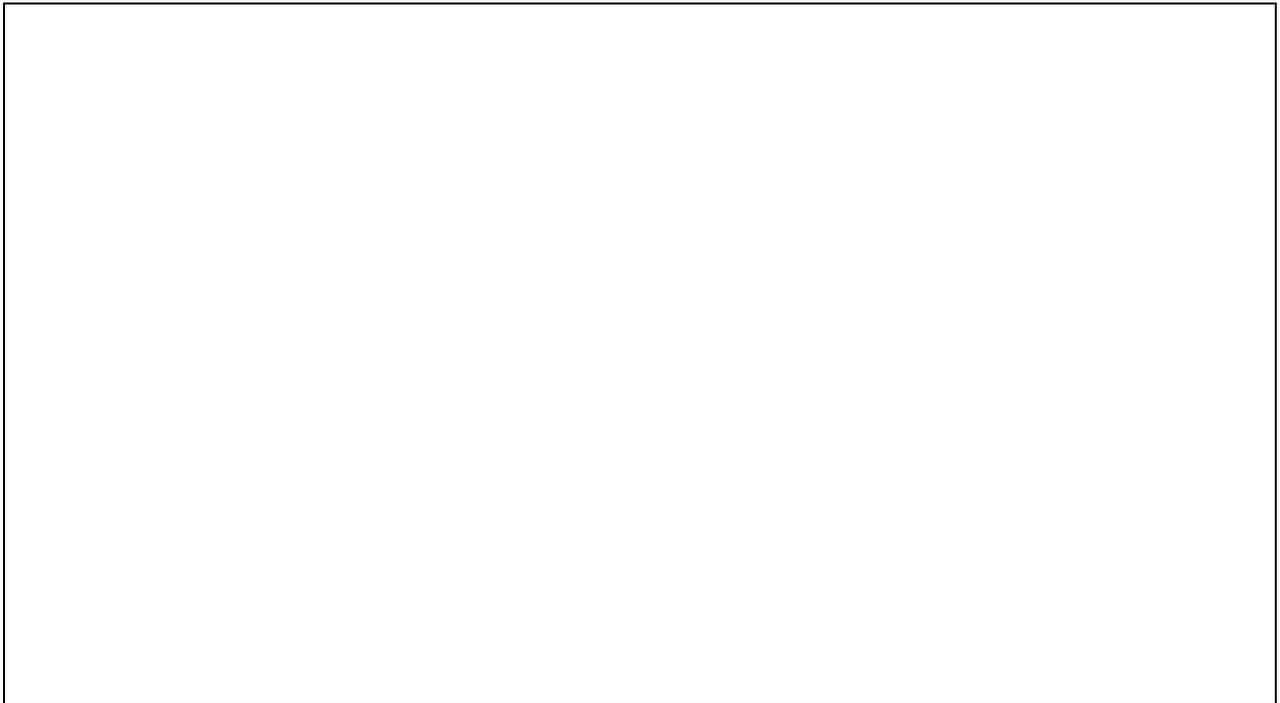
Clan Lab Contractors Procedural Report
Sheet E: Building Floor Plan Sketches

Label each room with floor and room number.

Basement

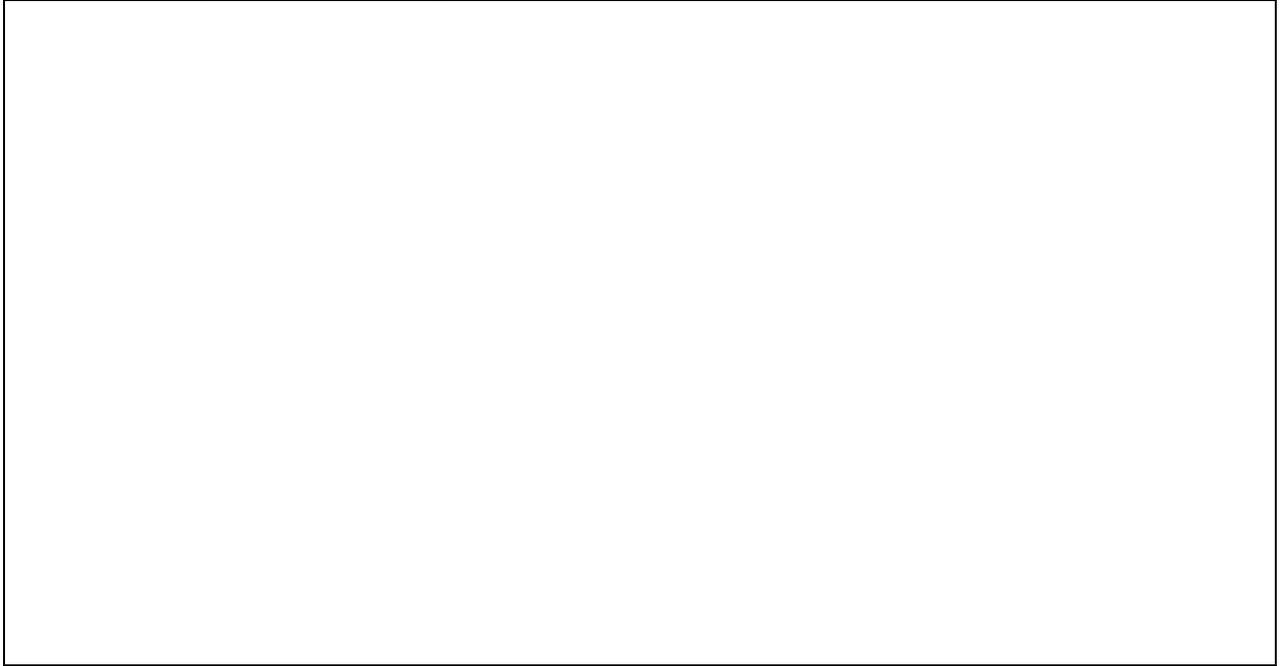


Floor One

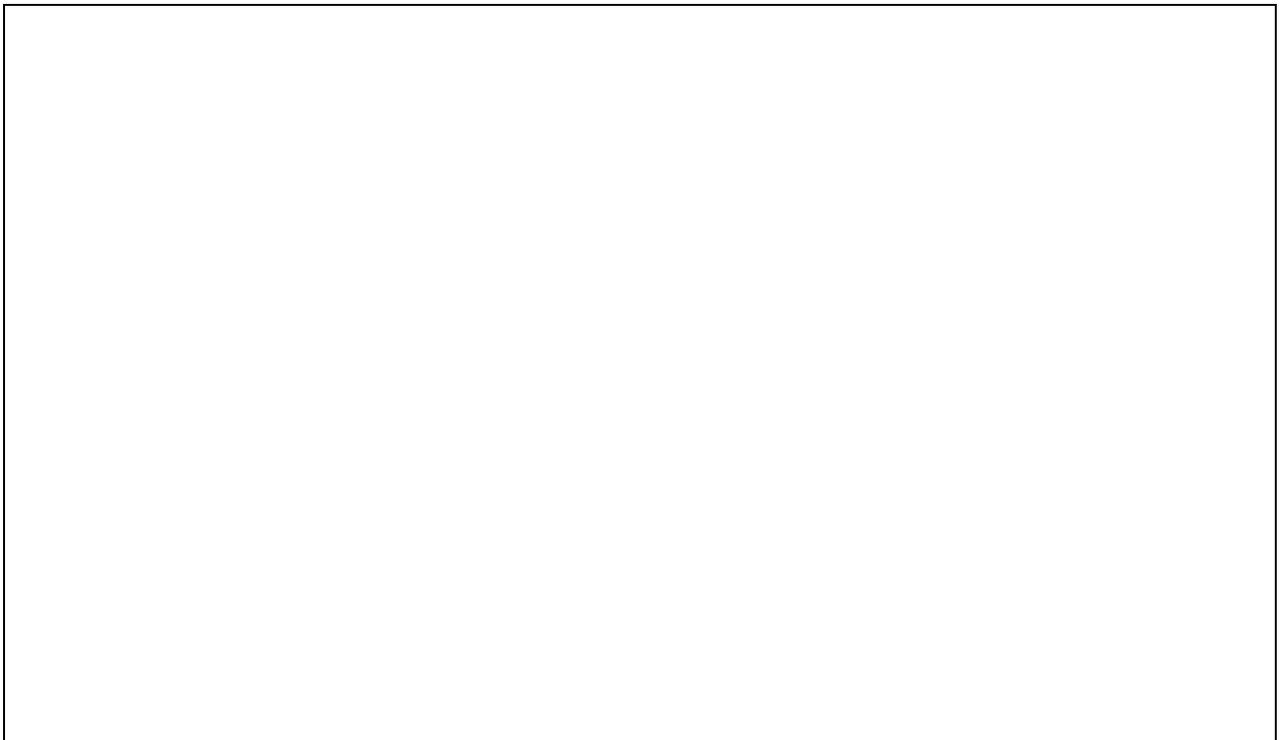


Sheet E: Building Floor Plan, continued

Second Floor (ex: 2BR1, 2BR2)



Third floor or attic



Clan Lab Contractors Procedural Report Sheet F: Plumbing Cleanup

1. Flush all plumbing to clear traps of solvents, lye, etc.
2. Conduct PID readings of all plumbing traps to nondetect.
3. Test for residual pH by collecting sample of material from each trap using a long handled cotton swab into each trap

Sink/drain/trap location	PID – nondetect (ND) or reading	pH	Notes (eg. visual evidence, stains, pitting or etching)
Kitchen			
Bathroom			
Second Bathroom			
Basement Utility Sink			
Garage Utility Sink			
Basement floor drain			

**Clan Lab Contractors Procedural Report
Sheet G: Individual Room Descriptions**

Contractor's Project Manager completes for each room sampled on property

Room Description (use) _____
Floor and room number from Sheet E _____
Wall building material _____
Floor building material _____
Ceiling building material _____

Sketch of room with windows, doors, vents; approximate dimensions, sample locations, obvious spillage, other features, north arrow.

If pre-cleaning sampling done per a sampling plan approved by the local authority, enter sampling results here or mark them with room number on laboratory reports:

Sample ID#_____ Result _____ micrograms/sq.ft. meth.

Item or material sampled?

Sample ID#_____ Result _____ micrograms/sq.ft. meth.

Item or material sampled?

Sample ID#_____ Result _____ micrograms/sq.ft. meth.

Item or material sampled?

Sample ID#_____ Result _____ micrograms/sq.ft. meth.

Item or material sampled?

pH sampling results: _____

PID sampling results (30 second ambient air average):

PID highest reading found in room (e.g. stained area, sink trap, etc.):

Sheet G: Individual Room Description, continued

Describe room furniture and/or contents to be cleaned and/or disposed.

Describe cleaning methods used for each area or item. (e.g. manual scrub, xx solution, rinses, steam cleaning, other) (include walls, ceiling, floor, windows, counters, fans, etc.)

Describe sealing or painting (paint type (ex. oil, latex) and method (ex. rolling, spraying)).

Floor

Walls

Ceiling

Woodwork

Other

If after-cleaning sampling is done (locations and type must be pre-approved by local authority)

Sample ID# _____ Result _____ micrograms/sq.ft. meth. Item or material sampled:

Item or material sampled?:

Sample ID# _____ Result _____ micrograms/sq.ft. meth. Item or material sampled:

Item or material sampled?:

pH sampling results: _____

PID sampling results (30 second ambient air average): _____

PID highest reading found in room (e.g. stained area, sink trap, etc.): _____

Other pertinent information:

Clan Lab Contractors Procedural Report Sheet H: Garage, Outbuilding, and Other Non-Occupancy Structures

In first column, reference building numbers used on site sketch from Sheet D2. Describe the general construction, building materials, and use of each non-occupancy structure:

Construction and dimensions (e.g. pole barn, 30'x20')	Building materials exposed to occupants (e.g. raw wood, dirt floor, wallboard, etc.)	Current use & future usability (e.g. used for storage/barn, structurally unsound, etc.)
<u>Building 1.</u>		
<u>Building 2.</u>		
<u>Building 3.</u>		
<u>Building 4.</u>		

<p>If pre-cleaning sampling done per an approved sampling plan, provide for each structure: Sample ID#_____ Result _____ micrograms/sq.ft. meth. Item or material sampled? pH sampling results: PID sampling results (30 second ambient air average):_____ PID highest reading found in room (e.g. stained area, sink trap, etc.):_____</p>
<u>Building 1.</u>
<u>Building 2.</u>
<u>Building 3.</u>
<u>Building 4.</u>

Sheet H: Garage, Outbuilding, Other Non-Occupancy Structures, continued

For each garage, outbuilding, or non-occupancy structure describe a) structure cleaning and sealing; b) structure contents, and their cleaning or disposal.

a) structure cleaning and sealing. Note here if structure is to be demolished.	b) structure contents, cleaning, disposal, remaining uncleaned contents
<u>Building 1.</u>	
<u>Building 2.</u>	
<u>Building 3.</u>	
<u>Building 4.</u>	

Other pertinent information:

Attach Laboratory Data Sheets to Report

Clan Lab Contractors Procedural Report
Sheet I: Forced Air Heating System Description and Cleanup

1. If sampling, sample flat surface at the cold air plenum of the furnace, before the filter.

Result _____ µg/sq.ft. meth

2. Describe duct cleaning done per MDH guidance: (method, subcontractor, etc.)

Clan Lab Contractors Procedural Report
Sheet J: Furniture, Carpeting and Draperies

See Guidance for furnishing cleanup/disposal options.

Describe any sampling and analytical results (if not detailed on Sheet F) when carpet, furniture or other household goods are sampled and cleaned. Attach laboratory data sheets to report.

Describe disposal of household furnishings, if not detailed on Sheet F. Render all furnishings unusable to discourage scavenging

Solid Waste Disposal Facility _____ City _____

Clan Lab Contractors Procedural Report

Sheet K: Appliance Disposal and Cleanup

1. Wash all appliances twice with hot detergent solution and rinse with clean water.
2. If sampling appliances, use methanol-dampened swab method described in Appendix C.
3. If sample is greater than $10 \mu\text{g}/\text{ft}^2$, wash appliance or dispose as solid waste or scrap. Render the appliance unusable to discourage scavenging.

Record $\mu\text{g}/\text{ft}^2$ for each major appliance, including but not limited to refrigerator, range/stove, dishwasher, washer and dryer:

Describe appliance cleaning or disposal

Attach laboratory data sheets to report

Clan Lab Contractors Procedural Report Sheet L: Confined Spaces Plan

If an attic, crawl space, pit or other limited access confined space was present on the property or in its structures, complete the following:

Describe the confined space:

Was the confined space a permit _____ or non-permit _____ confined space?

Identify any confined space hazards:

Describe hazard evaluation, assessment and entry plan:

Describe staff, equipment, environmental testing, and safety measures employed:

Other pertinent information:

Clan Lab Contractors Procedural Report
Sheet P: Project Completion Report.

(Cross out words or phrases if not applicable.)

Contractor Certification: I certify that the investigation and cleanup described in this report is in compliance with the *MDH/MPCA Guidance* dated April 3, 2007 and required by state law (as well as any applicable county or city ordinance). I certify that all information submitted is true and accurate to my understanding, and that all laboratory results for this property are attached to this report.

Contractor's Project Manager signature: _____

Date: _____ Printed name: _____

Property Owner or Authority: I own or have legal authority for this property. I have received this report and submitted it to the local authority responsible for oversight of this remediation project. I certify that the information in this report about structures, wells, septic tanks and drainfields, chemical and oil use on the property, and clandestine laboratory operation on the property is true and accurate to my understanding.

Property Owner/Authority signature: _____

Date: _____ Printed name: _____

Local Authority: I am the local authority for the property that is the subject of this report. I have accepted the final report signed and dated by Contractor's project manager on _____, and signed and dated by the property owner on _____.

The investigation and cleanup required under state and/or local ordinance and order are complete and satisfactory to the best of my knowledge. (Cross out following sentence(s) if not applicable.) Any no-occupancy order issued under ordinance or Chapter 145A will be vacated. Nothing prohibits a local authority from reinstating a no-occupancy order or taking other action if subsequent information indicates further clandestine laboratory activity on this property, or if additional information is obtained regarding presence or health significance of methamphetamine or other chemical residues on this property.

Local Authority signature: _____

Date: _____ Printed name: _____

Affidavits filed if required? Y / N