

**THE REGIONAL MUNICIPALITY OF HALTON**

**Contract # T-687-24**

**Resident Door Replacement at Allendale Long Term Care Home**

## **SPECIFICATIONS**

SPECIFICATIONS

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## **PART 1      GENERAL**

### **1.1      General**

- .1 Allendale Long Term Care Home (LTCH) is located at 185 Ontario Street South in Milton, Ontario. The building is 2-storey and contains four wings and a central core. The Resident rooms are equipped with one entry and one washroom wood doors. Common area washrooms and storage rooms are equipped with entry metal doors. Most doors are deteriorated and require replacement.
- .2 The building shall remain in use in areas not immediately affected by the work. Ensure that normal building operations and maintenance may be carried out without disruption, except as otherwise noted herein or stated in the Bid.
- .3 The contractor acknowledges that he has examined all specifications relevant to the contract and is fully acquainted with the actual conditions and the same as shown or represented in the said specifications and that the Contractor has a full understanding of the difficulties which may be encountered.
- .4 The contractor will, regardless of conditions, the site, or its surroundings, complete the work to the satisfaction of The Region, for the compensation agreed upon and assume full and complete responsibility, therefore.
- .5 Any additional work over and above this Contract shall be authorized only in writing from the Region.
- .6 The contractor shall provide full protection to all property of the Region and property, etc., in the care of the Region. Damage caused by work under this Contract shall be the sole responsibility of this contractor and will be fixed/repaired / replaced at no additional cost.

### **1.2      Substitution Procedures**

- .1 All materials and equipment provided as part of this project shall be as per the project Specifications unless an approved alternate (substitution) has been approved by the Regional Representative at the time of Bid or construction.
- .2 Where a Bidder is proposing to substitute material or equipment specified in the Bid Document during the bidding period, the Bidder shall submit a completed Substitution Request Form (refer to Appendix D of these Specifications) with back up documentation before the Question Deadline Date and initiate the substitution request following the process identified in Instruction to Bidders Section 2 – ANY COMMUNICATIONS. An addendum will be issued confirming proposed substitute's acceptance or rejection. Substitutes may not be considered if proper back up documentation is submitted after the Question Deadline Date has passed.

### **1.3      Standards**

- .1 The Contractor agrees to conform to and/or abide by the latest editions of the following:
  - .1 The Provincial and/or National Building Code.
  - .2 The Provincial and/or National Occupational Health & Safety Standards or Regulations.
  - .3 The Construction Project Regulations.
  - .4 The Workplace Hazardous Materials Information System (WHMIS) Regulations.
  - .5 The Provincial Fire Code.

- .6 Ontario Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes.
- .7 Perform all work in accordance with current Code requirements and local and municipal by-laws.

#### **1.4 Project Schedule**

- .1 Measurements, mock-ups and manufacturing lead times are to be coordinated before site work commences to ensure door installation is not delayed.
- .2 The Contractor and the Region shall co-operate fully in making the premises available and ready for the work. All work shall be performed in a timely manner so as to minimize disruptions and duration. Work shall be allowed only from 8 a.m. to 5 p.m., Monday to Friday. The work shall be performed in accordance with the start date and duration given in the Bid Document or an approved schedule.
- .3 Seventy-two (72) hours written notice to the Consultant and Region is required for work to be performed outside the designated times, if permitted by the Region.
- .4 If the Contractor needs to work weekends or overtime to accommodate the schedule, this will be done at no extra cost to the Region.
- .5 Schedule to be submitted to Consultant and the Regional Representative for approval.
- .6 During the course of the project, if there are significant changes in the schedule, an updated schedule needs to be prepared and submitted for approval.

### **PART 2 SAFETY**

#### **2.1 Protection**

- .1 Maintain all emergency and service routes clear at all times.
- .2 Where required provide tarpaulins to protect against debris, material spills, damages caused by the work. The Contractor will clean and repair any damage, to the property and/or adjacent properties, at no extra cost to the Region.
- .3 Before commencing work, inspect all building components including door frames, and walls within or adjacent to the area of work. Submit a photographic record of existing damages to The Region & Consultant. Catalogue existing conditions.
- .4 Remove or store all tools and equipment as directed by the Regional Representative at the end of each day's work.
- .5 Protect and provide guard cones around work areas / statutory toolkits to prevent residents from approaching these.

### **PART 3 REQUIREMENTS OF WORK**

#### **3.1 Qualifications**

- .1 The Contractor must have a site supervisor at all times and sufficient manpower to complete all work as per the approved schedule.
- .2 Employ only experienced, qualified workers. Submit certifications / educational qualifications of the workers to the Regional Representative. The Region reserves the right

to request a replacement if the Region finds the worker unqualified for the work.

- .3 Ensure that quality of work conforms to best practices of the trade and as specified.

### **3.2 Existing Conditions**

- .1 Verify existing conditions on site and dimensions shown on the Drawings and report any errors or inconsistencies to the Consultant before commencing the Work.

### **3.3 Pre-Start Meeting**

- .1 An initial project meeting shall take place on the site with the Regional Representative, Consultant and the Contractor at least one week prior to the arrival of any workers, materials or equipment on the job.

### **3.4 Site Progress Meetings**

- .1 Site progress meetings will be held on bi-weekly basis from the commencement of the project.
- .2 Contractor shall have their Project Superintendent and Project Foreman present for these meetings.

### **3.5 Submittals**

- .1 General:
  - .1 Provide minimum of one (1) copy, unless otherwise directed by Consultant, of all required submittals within ten (10) working days after of receipt of Notice of Award.
- .2 Emergency telephone numbers:
  - .1 Submit to the Regional Representative during the kickoff meeting a list of twenty four (24) hours per day, seven (7) days per week emergency telephone numbers. The Site Supervisor and Foreman contact numbers should also be included in this list.

### **3.6 Temporary Utilities and Facilities**

- .1 Electrical Power:
  - .1 If available, temporary electrical power for hand held equipment will be provided free of charge by The Region, otherwise, the Contractor will be responsible for providing own power. Arrange and pay for any usage and connection costs required for all other equipment. Do not connect to the building's power supply without written permission of The Region.
- .2 Materials to and from Site:
  - .1 Coordinate with The Regional Representative for transporting material and equipment to the work areas each day.
  - .2 There is limited storage access on site. Contractor will need to bring doors in batches and also remove the discarded doors on a daily basis.
  - .3 Transport of material within the building should be in accordance with Infection Prevention and Control (IPAC) procedures in accordance with CSA standard Z317.13 as these are in direct contact with the residents within the homes.
  - .4 Contractor may provide Sea Can for storage of doors onsite. The storage and safeguarding of the doors when onsite will be responsibility of the Contractor. The Region will not be held liable for any damage or missing of parts and

materials of the Contractor. Otherwise, the Contractor may also choose to deliver the doors onsite on daily basis as needed. There is no provision to store the new or the removed doors within the Building. Contractor is to oversee the disposal of the removed doors from the site on daily basis.

- .3 Sanitary:
  - .1 Provide portable washroom facilities for workers as required by provincial or local regulations. Location as directed by Regional Representative.
  - .2 Maintain these in a clean and sanitary condition at all times. These portables should be emptied at least once weekly.
- .4 Parking:
  - .1 The Contractor and Sub-contractors must make arrangements with The Region for parking for vehicles of their own forces.
- .5 Site Signage:
  - .1 All construction related signs or posters relative to fire, danger and safety or those required by law, shall be prominently displayed at required locations.
  - .2 No signs or advertising shall be permitted to be erected on the building or site, without prior approval by the Consultant or the Regional Representative.
  - .3 If fire exits are blocked during construction, alternate route to be identified.
- .6 Outbreak:
  - .1 During Outbreaks, Contractor will be asked to demobilize from site until the conditions are assumed safe again to continue with works. Contractor to demobilize and remobilize at no additional cost to the Region.

### **3.7 WASTE MANAGEMENT**

- .1 Leave work areas in a tidy, safe and secure condition at the end of each workday.
- .2 Material and debris resulting from the Construction shall be disposed of offsite daily.
- .3 Material or waste storage on site must be approved by The Region in advance. Follow the measures recommended in the ICRA form for waste management.

**END OF SECTION**

**PART 1 GENERAL**

Work under this Contract is to replace the entry and washroom wood doors and kick plates in the resident rooms at Allendale Long Term Care Home located at 185 Ontario Street South in Milton, Ontario. The hardware from the existing doors are to be reused for the new doors. These include handles, locks, hinges, etc. The quantity of replacement wood doors in the scope of work is as follows:

WING	Resident Entry Door	Resident Washroom Door
Wing A – Nelson House	22	22
Wing B – Trafalgar House	22	22
Wing C – Adams House	22	22
Wing D – Bronte House	22	22
Wing A – Halton House	22	22
Wing B – Sykes House	22	22
Wing C – Petit House	22	22
Wing D – Allen House	22	22
<b>TOTAL</b>	<b>176</b>	<b>176</b>

Refer to enclosed Drawings for specific locations of doors to be replaced.

**PART 2 SCOPE OF WORK – BASE BID**

The work includes, but is not limited to, the following:

**2.1 Item A: General Items**

- .1 **Mobilization and Demobilization:** Provide all labor, material, and equipment necessary to undertake the work in this Contract. Prior to mobilizing to site, the Contractor is to provide a schedule of the work to be completed, this will require approval from the Consultant and the Regional Representative.
- .2 **Access:** Provide access as required to facilitate the performance and inspection of the work described herein. This shall include all related equipment, safety supervision, engineering, etc. Access shall be made available into units when door replacement is scheduled and will be coordinated through Regional Representative and the Consultant.
- .3 **Interior Construction Barrier:** Supply and install drop cloths for floor coverings at all interior paths of travel and work areas to protect interior finishes and resident belongings from construction activities. Remove all interior construction protection and materials at the end of each working day.
- .4 **Shop Drawings:** Provide shop drawings for the interior doors including all framing and hardware details. Revise drawings as required by the Consultant.

## 2.2 Item B: Door Replacement

- .1 Residents and The Region will be asked to move all personal belongings and furniture away from the door areas to accommodate the work.
- .2 This work is to take place at the suite entry doors and washroom doors (if awarded as part of contract) of each residential unit. Please note the residents within these rooms will not be mobilized to another location. Contractor to complete the entire cycle, removal and installation of new doors, within one working day.
- .3 Remove and dispose the existing doors off site excluding the hardware (door hinges and handles). Take care not to damage the existing frame and interior drywall finishes and interior floor finishes. Salvage the door hardware, label, and store on a secure site location for later re-installation. If any hardware is damaged, Contractor is to notify Halton Region as they may consider replacing with new hardware. The maglocks on doors need to be disposed as well.
- .4 Notify the Consultant of any damage to the existing door frame for review. Where required, complete repairs to existing frame, as directed by the Consultant. These repairs are to be paid out of the Contingency Allowance and will be designed at the time of identification by the Contractor.
- .5 Supply and install new interior wood doors as per Section 08 14 00. The new wood doors to be 1/3hr fire rated minimum. Exception to the suite entry wood doors (8 doors to be 3/4hr fire rated) located along the 1hr fire separation shown on floor plan Drawings between gridlines 8 and 9. The door assembly shall re-use all existing hardware and hinges. The door hinge side shall be maintained such that each door opens in the same manner as the existing configuration (same handedness and direction of swing). The new doors are to suit existing frame size. Contractor is responsible to field verify all door dimensions, frame configurations and fire-rating prior to fabrication.
- .6 Supply and install new stainless steel kick plates at all the new wood doors.

## 2.3 Item C: Contingency Allowances

- .1 **Contingency Allowance for Miscellaneous Repairs:** Allowance to cover repairs to unforeseen or concealed conditions found during door replacement. Work under this item is only to be completed under direction of the Consultant in writing.

**END OF SECTION**



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## **PART 1 SUBMISSION REQUIREMENTS**

### **1.1 Purpose**

- .1 This Section is to be read in conjunction with, and supplement procedures for submittals as outlined in Section 01 00 00 – General Requirements.

### **1.2 Acceptable Forms**

- .1 Acceptable forms of submission are electronic transmission to the Consultant in pdf format.
  - .1 Electronic submissions exceeding 10 Megabytes in size require coordination for delivery to the Consultant via email.

### **1.3 Transmittal**

- .1 Each submission by the Contractor shall be accompanied by a transmittal sheet. The transmittal sheet shall include:
  - .1 Name and address of project prominently displayed;
  - .2 Name of Contractor, Regional Representative, and Consultant;
  - .3 Date of submission; and,
  - .4 Itemized list of the contents of the submission, including relevant Specification Section for each item and number of pages or samples associated with each item.

### **1.4 Product Data**

- .1 Manufacturer's product data sheets and material safety data sheets (SDS) shall be submitted for all products being used in the completion of the work.

### **1.5 Samples**

- .1 Each sample provided by the Contractor shall be an accurate representation of the work to be completed. They shall be prepared using the same tools to be used in completion of the work.
- .2 Samples submitted for color selection or texture only shall be noted as such on the submission transmittal.
- .3 The Consultant will retain sample submissions until completion of the work.
- .4 Where color or texture samples are submitted the manufacturer's name, product name and color or texture shall be clearly indicated on the sample.

### **1.6 Shop Drawings**

- .1 Shop drawings shall be reviewed by the Contractor for general conformance to specifications prior to submission to the Consultant. The Contractor shall affix a company stamp to the drawings indicating their review.
- .2 Drawings to clearly indicate dimensions in metric scale.
- .3 Drawings shall clearly detail all anchor points, connections, transitions, and methods of attachment.

### **1.7 Others**

- .1 Any other submittal not fitting a category called out above (ex. Letter from a

manufacturer, etc.) shall be subject to the same submission requirements as outlined in this document.

**PART 2 GENERAL SUBMISSIONS**

**2.1 Required Submissions**

- .1 Prior to commencement of any work the Contractor shall submit to the Consultant the following:
  - .1 Detailed project schedule, showing key milestones and contingency days;
  - .2 Notice of Project to be posted by the Contractor at the entrance of the building;

**PART 3 SECTION SPECIFIC SUBMITTALS**

**3.1 General**

- .1 No work of any Section shall be commenced until all submissions of that Section have been approved and returned to Contractor by the Consultant.
- .2 Coordinate submission of all items of a single Section to prevent delays and duplicate submissions.
- .3 The Consultant will be entitled to 10 working days from the date of receipt for review of all submissions. If a submission is time sensitive, requiring review prior to end of 10 working days, the Consultant must be notified in writing of the date review must be completed and the reason for the earlier date at the time the original submission is made.

**3.2 Submittal Schedule**

- .1 The following submissions must be made to the Consultant:

Section	Required Submittals
General Conditions	<b>Schedule</b> with details of each aspect of the work

Section	Required Submittals
General Conditions	<b>Pre-existing Deficiencies</b> in work areas. If one is not submitted, the Contractor is responsible for addressing the deficiencies if the Consultant suspects the deficiency may have been caused by the work.
In-Swing Entry Doors	<b>Door Manufacturer's Cut Sheets</b> for proposed door product. To include relevant performance data for the door.
Door Hardware	<b>Hardware Manufacturer's Cut Sheets</b> for proposed hardware product.

**PART 4      MOCK-UPS**

**4.1      General**

- .1 No mock-up shall be constructed prior to submission and approval of all required submittals related to the work of the mock-up.
- .2 Build mock-ups on site for review and approval prior to beginning construction of the work. Approved mock-ups will constitute part of the finished construction where finishes and textures are the same as those selected by the Region.
- .3 Mock-up installation location will be selected by the Consultant.
- .4 Mock-up shall be completed by the same workers who will be completing the full construction, using the tools and products to be used during regular construction.
- .5 The Contractor will alert the Consultant and the Regional Representative prior to commencement of the mock-up construction. Construction of the mock-up is not to commence unless the Consultant is present on site.
- .6 Mock-up construction shall be completed such that the construction schedule is not delayed due to corrections or material lead times.

**4.2      Mock-up Schedule**

- .1 The following mock-ups are to be constructed for review by the Consultant:

Section	Required Mock-Ups
In-Swing Door Installation	<b>One Complete Wood and Metal Door (two total) Installation</b> that includes all necessary hinges, hardware, kick plates and frame painting.

**PART 5      WARRANTIES**

**5.1      General**

- .1 Notwithstanding paragraph 12.3.1 of the Supplementary Conditions the Warranty Period of Contractor warranty and Manufacturer's warranty is two years from the date when Ready-for-Takeover has been achieved or the date of termination of the Contract or the Contractor's right to continue with the Work.
- .2 The Contractor shall provide the following two signed warranties to the Owner, the cost of which shall be included in the Contract Price:
  - .1 Contractor warranty for labour and materials related to installation work of the new interior doors. The Contractor must submit a signed warranty to The Region for the installation of work specified covering a period of two (2) years. The warranty shall guarantee said installation work shall be free from defects related to workmanship or material deficiencies. Any repair required under the warranty will be carried out in accordance with the recommendations of the Consultant.
  - .2 Manufacturer's warranty against chipping, cracking peeling, blistering, fading or discoloration of factory applied finishes. The warranty shall guarantee their Products against material and manufacturing defects covering a period of two (2) years. Any repairs required shall be carried out in accordance with the

recommendations of the Consultant.

- .3 Unless otherwise stated, the warranty shall include, at no cost to the Region, all labor and materials to correct the defects and deficiencies. This shall include removal and reinstating components where required to gain access to the defect and/or deficiency. The warranty shall include all performance and aesthetic related issues as determined by the Consultant, such as leakage, de-bonding, corrosion, fading, discoloration, etc. The warranty excludes reasonable wear and tear.

**5.2 Warranty Schedule**

- .1 Provide the following warranties:

Section	Required Warranties	Warranty Period
In-Swing Doors	Manufacturer's Standard Warranty against Material Defects	Limited Lifetime

**END OF SECTION**

**PART 1      GENERAL**

**1.1      General**

Conform to the requirements of the **General Requirements** and **Scope of Work**.

**1.2      Pre-construction Deficiency Inspection**

- .1 Prior to bringing any material or equipment onto the site, inspect lobbies, corridors, common rooms and units which will be accessed for damage, deterioration, excessive wear or soiling. Submit a photographic or video log of the observed deficiencies to the Consultant and Regional Representative. Accept responsibility for any items not identified which require repair, painting or cleaning upon completion of work.

**1.3      Protection of Property**

- .1 Provide drop cloths or tarps on corridor and unit floors at all paths used by the workers.
- .2 The use of drop sheets around the interior work area is mandatory.
- .3 Be responsible for maintaining fire access to the building and necessary barricades or signs to control unauthorized access or use.
- .4 No storage of materials, tools and equipment will be permitted in hallways and said items must not restrict any paths of egress.

**1.4      Interior Clean-Up**

- .1 All waste shall be removed from the interior common spaces the same day that it is generated.
- .2 At the end of each day, the Contractor and the site Superintendent shall meet and review each unit for cleanliness.

**END OF SECTION**

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**PART 1 GENERAL****1.1 Description**

This Section specifies the supply and installation of inward swinging hollow metal doors in the common area washrooms and storage rooms.

**1.2 References**

- .1 Canadian Steel Door and Frame Manufacturers Association.
- .2 National Fire Protection Association (NFPA):
  - .1 NFPA 80, Standard for Fire Doors.
  - .2 NFPA 252, Standard Methods of Fire Tests of Door Assemblies.

**1.3 System Description**

- .1 Design Requirements:
  - .1 Steel fire rated doors and frames: labelled and listed by an organization accredited by Standards Council of Canada in conformance with CAN4-S104 and NFPA 252 for ratings specified or indicated.
  - .2 Provide fire labelled frames for openings requiring fire protection ratings. Test products in conformance with CAN4-S104, NFPA 252 and listed by nationally recognized agency having factory inspection services.

**1.4 Action and Informational Submittals**

- .1 Submit in accordance with Section 01 33 00 - Submittals, Mock-ups and Warranties.
- .2 Shop Drawings:
  - .1 Indicate each type of door, arrangement of hardware and required clearances.
- .3 Sustainable Design Submittals:
  - .1 Recycled Content:
    - .1 Submit listing of recycled content products used, including details of required percentages or recycled content materials and products, showing their costs and percentages of post-consumer content, and total cost of materials for project.
  - .2 Low-Emitting Materials:
    - .1 Submit listing of paints and coatings used in building, showing compliance with VOC and chemical component limits or restriction requirements.

**1.5 Samples**

- .1 Submit samples in accordance with Section 01 33 00 – Submittals, Mock-ups and Warranties.
- .2 Submit one (300mm x 300mm) corner sample of each type of metal door.
- .3 Show door construction, core, and faces.
- .4 Submit manufacturer's installation instructions.

## **1.6 Quality Assurance**

- .1 Regulatory Requirements:
  - .1 Metal fire rated doors: labelled and listed by an organization accredited by Standards Council of Canada.
- .2 Certificates: product certificates signed by manufacturer certifying materials comply with specified performance characteristics and physical properties.
- .3 Installer shall be able to demonstrate a minimum of five (5) years' experience installing doors.

## **1.7 Delivery, Storage and Handling**

- .1 Deliver materials to site undamaged in manufacturers or sales branch's original, unopened containers and packaging, with labels clearly identifying manufacturer and product name. Include installation instructions.
- .2 Store materials in an upright position, off ground, under cover, and protected from weather, direct sunlight, and construction activities.
- .3 Protect materials and finish during handling and installation to prevent damage.
- .4 Storage location within the Building to be identified along with the Regional Representative. Contractor may need to ship and store the doors in batches due to space limitations on site.

## **PART 2 PRODUCTS**

### **2.1 Manufacturers**

- .1 Manufacturer shall be a member in good standing of the Canadian Steel Door Manufacture's Association (CSDMA).

### **2.2 Design Requirements**

- .1 All fire rated doors shall have ULC appropriate label attached.
- .2 Manufacturing and fabrication shall be as specified, and not less than standards and tolerances set by the Canadian Steel Door and Frame Manufacturers Association.

### **2.3 Materials**

- .1 Hollow metal doors shall be fabricated from minimum 16 gauge steel.
- .2 Hollow metal doors shall be galvanized steel with zinc coating, internally reinforced, flush panel, without glass, 3/4 hours fire protection rating.
- .3 Doors shall be 45mm thick, full flash face, edge seam only.
- .4 Shop primer: to CAN/CGSB-1.105.
- .5 Color paint and finish to match existing metal doors.

- .6 Door size tolerances shall be as follows:
  - .1 Overall sizes: Plus or minus 0.8mm.
  - .2 Thickness: Plus or minus 1.6mm.
  - .3 Squareness: Diagonal difference maximum 3mm.
  - .4 Bow, Twist or Warp: Maximum 3mm.
  
- .7 Door Sizes:
  - .1 Door sizes shall be sized to suite existing frames. Contractor to measure existing doors and frames prior to fabrication of new doors.
  
- .8 Head, jamb and floor or threshold clearance for doors shall be as follows:
  - .1 Jamb or Head: 3mm
  - .2 Bottom: 6mm from finish unless indicated otherwise
  - .3 Lock Edges: Bevelled 3mm in 50mm
  
- .9 Levers and Locks:
  - .1 Contractor to reuse the existing levers and locks on the New Doors.
  - .2 If the Tender is awarded where the Contractor needs to procure and install new ones. The specifications of these are as follows:
    - i. Standard of Acceptance: K2 Commercial Hardware.
    - ii. Lever Name and Code: QTL230 passage; Essex (ESX); Satin Chrome.
  
- .10 Hinges:
  - .1 Each operable door panel is to be installed with three (3) standard weight full mortise 4" butt hinges fastened with four (4) screws each. At least two (2) of the screws at each hinge are to be #10 sized to penetrate structural wall/framing by 50mm (2") minimum.
  
- .11 Touch-up paint: as recommended by prefinished material manufacturer.

## **PART 3 EXECUTION**

### **3.1 Preparation**

- .1 Ensure the existing frame is free of damage.
- .2 Proceed with installation only after unsatisfactory conditions have been corrected.

### **3.2 Installation**

- .1 Install doors in accordance with manufacturer's instructions and approved shop drawings.
- .2 Install doors to be tight and freely operating.
- .3 Maintain alignment with adjacent work.
- .4 Secure assembly to framed openings, plumb and square, without distortion.
- .5 Adjust door components to ensure smooth operation.

### **3.3 Cleaning**

- .1 On completion and verification of performance and installation, remove surplus materials, excess materials, rubbish, tools and equipment.



- .2 Remove all product identification stickers and residue from door panels.
- .3 Leave work areas clean, free from grease, finger marks and stains.
- .4 Contractor to follow IPAC Control measurements when removing and disposing of old doors.

**END OF SECTION**

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**PART 1 GENERAL****1.1 Description**

This Section specifies the supply and installation of inward swinging wood doors for entry doors in the resident rooms.

**1.2 References**

- .1 Architectural Woodwork Manufacturers Association of Canada (AWMACK):
  - .1 Quality Standards for Architectural Woodwork.
- .2 National Fire Protection Association (NFPA):
  - .1 NFPA 80, Standard for Fire Doors.
  - .2 NFPA 252, Standard Methods of Fire Tests of Door Assemblies.

**1.3 System Description**

- .1 Design Requirements:
  - .1 Washroom wood fire rated doors: labelled and listed by an organization accredited by Standards Council of Canada in conformance with CAN4-S104 and NFPA 252 for ratings specified or indicated.
  - .2 Provide fire labelled frames for openings requiring fire protection ratings. Test products in conformance with CAN4-S104, NFPA 252 and listed by nationally recognized agency having factory inspection services.

**1.4 Action and Informational Submittals**

- .1 Submit in accordance with Section 01 33 00 - Submittals, Mock-ups and Warranties.
- .2 Shop Drawings:
  - .1 Indicate each type of door, arrangement of hardware and required clearances.
- .3 Sustainable Design Submittals:
  - .1 Low-Emitting Materials:
    - .1 Submit listing of paints and coatings used in building, showing compliance with VOC and chemical component limits or restriction requirements.

**1.5 Samples**

- .1 Submit samples in accordance with Section 01 33 00 – Submittals, Mock-ups and Warranties.
- .2 Submit one (300mm x 300mm) corner sample of each type of wood door.
- .3 Show door construction, core, and faces.
- .4 Submit manufacturer's installation instructions.

**1.6 Quality Assurance**

- .1 Regulatory Requirements:
  - .1 Wood fire rated doors: labelled and listed by an organization accredited by Standards Council of Canada.
- .2 Certificates: product certificates signed by manufacturer certifying materials comply

with specified performance characteristics and physical properties.

- .3 Installer shall be able to demonstrate a minimum of five (5) years' experience installing doors.

### **1.7 Delivery, Storage and Handling**

- .1 Deliver materials to site undamaged in manufacturers or sales branch's original, unopened containers and packaging, with labels clearly identifying manufacturer and product name. Include installation instructions.
- .2 Store materials in an upright position, off ground, under cover, and protected from weather, direct sunlight, and construction activities.
- .3 Protect materials and finish during handling and installation to prevent damage.
- .4 Storage location within the Building to be identified along with the Regional Representative. Contractor may need to ship and store the doors in batches due to space limitations on site.

## **PART 2 PRODUCTS**

### **2.1 Manufacturers**

- .1 Acceptable Manufacturers are:
  - .1 Baillargeon;
  - .2 Doortek;
  - .3 RK Doors; or
  - .4 Approved Alternate. The alternative should be reviewed and approved before the Bid Closing. Please refer to Appendix D Substitution Request Form for terms and conditions of alternate approval.

### **2.2 Design Requirements**

- .1 All fire rate doors shall have ULC appropriate label attached.
- .2 Manufacturing and fabrication shall be as specified, and not less than ULC Standards tolerances for wood core doors meeting the performance required by CAN/ULC-S104 for fire rated closure assemblies.

### **2.3 Wood Flush Doors**

- .1 Solid core: to CAN/CSA-O132.2.1:
  - .1 Nominal door size resident front entrance: 2120mm x 1090mm.
  - .2 Nominal door size resident washroom: 2120mm x 890mm.
  - .3 Thickness: 45mm.
  - .4 Wood: Hinge stile: 2-1/8" laminated wood.
  - .5 Handle stile: 2-1/8" laminated wood.
  - .6 Handle and hinge edge vinyl caps: yes.
  - .7 Levers and locks:
    - .1 Standard of Acceptance: K2 Commercial Hardware, or approved alternate.
    - .2 Lever Name and Code: QTL230 passage; Essex (ESX); Satin Chrome.
- .2 Door size tolerances shall be as follows:

- .1 Overall size: Plus or minus 0.8mm.
  - .2 Thickness: Plus or minus 1.6mm.
  - .3 Squareness: Diagonal difference maximum 3mm.
  - .4 Bow, Twist or Warp: Maximum 3mm.
- .3 Door Sizes:
- .1 Door sizes shall be sized to suite existing frames. Contractor to measure existing doors and frames prior to fabrication of new doors.
- .4 Colour varnish and finish to match existing wood doors.
- .5 Head, jamb and floor or threshold clearance for doors shall be as follows:
- .1 Jamb or Head: 3mm.
  - .2 Bottom: 6mm from finish unless indicated otherwise.
  - .3 Lock Edges: Bevelled 3mm in 50mm.
- .6 Hinges: Each operable door panel is to be installed with three (3) standard weight full mortise 4" butt hinges fastened with four (4) screws each. At least two (2) of the screws at each hinge are to be #10 sized to penetrate structural wall/framing by 50mm (2") minimum.

## **PART 3 EXECUTION**

### **3.1 Preparation**

- .1 Ensure the existing frame is free of damage.
- .2 Proceed with installation only after unsatisfactory conditions have been corrected.

### **3.2 Installation**

- .1 Install doors in accordance with manufacturer's instructions and approved shop drawings.
- .2 Install doors to be tight and freely operating.
- .3 Maintain alignment with adjacent work.
- .4 Secure assembly to framed openings, plumb and square, without distortion.
- .5 Adjust door components to ensure smooth operation.

### **3.3 Cleaning**

- .1 On completion and verification of performance and installation, remove surplus materials, excess materials, rubbish, tools and equipment.
- .2 Remove all product identification stickers and residue from door panels.
- .3 Leave work areas clean, free from grease, finger marks and stains.
- .4 Contractor to follow IPAC infectious control measurements while removal, installation and disposal of doors.

**END OF SECTION**

## **PART 1 GENERAL**

### **1.1 Description**

This Section specifies surface preparation and application of protective coatings to steel and wood elements.

### **1.2 Quality Assurance**

- .1 Employ a Subcontractor with a minimum of two years' experience as an independent contractor specializing in paint.

### **1.3 Submittals**

- .1 Provide paint samples for approval as required by the Consultant and in accordance with Section 01 33 00.
- .2 Paint Schedule approval: Before ordering, submitting a schedule endorsed by the paint manufacturer of all paint types, showing brands and quality identification of material to be used, for approval.

## **PART 2 PRODUCTS**

### **2.1 Paint**

- .1 Paint materials to be products of a single manufacturer and designated by that manufacturer to be compatible with the existing conditions and to each other.
- .2 **Gloss terms:** Having the following values when tested in accordance with ASTM D523 "Test for Specular Gloss", 60-degree gloss meter method:
  1. Matte: 0-3.5
  2. Eggshell: 4-7
  3. Low Lustre: 9-14
  4. Satin: 28-38
  5. Semi-gloss: 45-60
  6. Gloss: >70

### **2.2 Thinners and Cleaners**

- .1 **Thinners, cleaners, etc.:** Type and brand recommended by the paint manufacturer, bearing identifying labels.

## **PART 3 EXECUTION**

### **3.1 Quality Control**

- .1 All work shall meet or exceed the more stringent of the manufacturer's requirements or the requirements of this Specification, or the standards quoted.

### **3.2 Preparation - General**

- .1 Thoroughly vacuum clean all surfaces to be painted.
- .2 Furnish sufficient drop cloths, shields and protective equipment to prevent spray or dropping from fouling surfaces not being painted. Covers shall be placed before painting commences and remain until completed.

- .3 Place cotton waste, cloths and material which may constitute a fire hazard in metal containers and remove daily from site.
- .4 Remove all electrical plates, surface hardware, fittings and fastenings, prior to painting operations. Store and replace in undamaged condition on completion of work in each area.
- .5 Mask off and protect finished surfaces and materials in a manner acceptable to the Consultant.

### **3.3 Preparation - Wood**

- .1 Sand finish surfaces smooth with No. 00 sandpaper. Clean soiled surfaces with an alcohol wash. Wipe off dust and other loose dirt, or vacuum clean before application of coatings.
- .2 Seal knots, pitch, and sapwood with two coats of shellac. After prime coat is dry and sanded, fill nail and screw holes, and cracks with wood filler, or with putty for interior work and caulking compound for exterior work. Colour fillers to match wood or stain if surfaces are given clear final coatings. Smooth, sand, and prime fillers when set.
- .3 Sand and fill exposed plywood and particleboard edges. Use filler compatible with finishing materials.

### **3.4 Preparation - Metal Surfaces**

- .1 **Unprimed steel:** Remove weld flux, scale and rust with scrapers, wire brushes, wire power wheels, sandblasting, chipping, or grinding as may be required. Finish surfaces smooth, and remove weld flux alkali contamination with phosphoric acid solution. Wash with solvent.
- .2 **Primed steel:** Before touch-up of prime paint, smooth out surface irregularities; clean weld joints, bolts, nuts, and damaged areas with phosphoric acid solution; and wash with solvent.
- .3 **Galvanized steel:** Prepare galvanized surfaces washing with phosphoric acid etch. If metal surface has been treated with a sealer it must be removed by scrubbing with a non-metallic 3M Scotch-Brite pad followed by phosphoric acid wash.

### **3.5 Application**

- .1 Do work by skilled tradesman, to manufacturer's directions. Apply paint only when dust-free conditions prevail. Results shall be even, uniform in sheen, colour and texture; free from brush or roller marks, or other defects.
- .2 Apply paint by brush or roller. Spray painting may be permitted at the approval of the Consultant before work commences.
- .3 The Consultant may at any time prohibit the use of spray painting for such reasons as carelessness, poor masking or protective measures, drifting paint fog, disturbance to other trades or failure to obtain a dense, even, opaque finish.
- .4 Do not paint exterior surfaces during windy or rainy weather, or when temperature is below 10 degrees Celsius, or when surfaces are damp or exposed to hot sun. Interior temperatures shall be minimum 15 degrees Celsius.
- .5 Permit paint to dry and touch up suction spots before applying succeeding coats.

- .6 Tint various coats of multiple coat work to distinguish between coats.
- .7 The painting coats as specified are intended to cover surfaces perfectly. If the Contractor is of the opinion that the specified materials will not provide uniform coverage, report in writing to the Consultant, before commencing the work. If surfaces finished as specified are not covered perfectly, apply additional coats at no additional cost.
- .8 Use same brand of paint for primer, intermediate, and finish coats. For moisture and mould resistant gypsum board.
- .9 Reduce materials only when indicated by paint manufacturer. Reduce only with approved thinner.
- .10 Remove finishing hardware, fittings and trim prior to painting and replace after painting is finished. Alternatively, use masking tape and remove tape before paint is dry.
- .11 Strain paint through fine mesh if hardened paint or foreign materials are present in the container.
- .12 Keep sprinkler heads free of paint.
- .13 Paint both sides and edges of plywood backboards for equipment before installation. Leave equipment in original finish except for touch-up as required, and paint conduits, mounting accessories and other unfinished items.

### **3.5 Application of Base/Finish Coats**

- .1 Apply in strict accordance with manufacturer's requirements. Do not use any other paint application methods unless prior written approval is obtained from the Consultant.
- .2 Apply base coat and finish coats to all surfaces to exceed the minimum DFT specified by the Consultant.
- .3 The dried finish coat shall be uniform in appearance, color, and gloss. The "lap-in" areas shall exhibit uniformity with the adjacent painted areas. The finish shall be free of dirt, coarse particles, or any other foreign matter.
- .4 The final finish coat shall completely cover in one application. The Contractor shall touch-up areas which were not properly coated the first time.

**END OF SECTION**

# Appendix A

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## IPAC Standard



# **Infection Prevention and Control (IPAC) Standard for Long-Term Care Homes**

April 2022

**Introduction:**

Comprehensive evidence-based Infection Prevention and Control (IPAC) practices are critical to the safety of residents, staff, caregivers and others in Ontario's long-term care homes. This document has been developed based on current evidence-based requirements for IPAC in long-term care and reflects robust practices that are appropriate to the long-term care setting.

**Requirements under *the Fixing Long-Term Care Act, 2021***

This Infection Prevention and Control (IPAC) Standard (the "Standard") for Long-Term Care Homes is issued by the Director pursuant to section 102(2)(b) of the Regulation under the *Fixing Long-Term Care Act, 2021* (the "Act").

The licensee is required to implement any standard or protocol issued by the Director with respect to infection prevention and control. The Act and O. Reg. 246/22, contain requirements related to IPAC and also require the licensee to implement any standard or protocol issued by the Director with respect to IPAC.

This document sets out requirements for IPAC programs in Long-Term Care (LTC) homes during periods of regular operations and during infectious disease outbreaks. Licensees must comply with these requirements in a way that respects and promotes residents' rights as set out in the Residents' Bill of Rights under section 3 of the Act.

Homes are to review the Act and the Regulation in their entirety. In the event of a conflict between this Standard and another requirement under the Act, the Regulation or any other applicable law, the requirement in the Act, the Regulation, or other applicable law prevails.

**Effective Date:**

This IPAC Standard for Long-Term Care Homes is effective as of the date when O Reg. 246/22 under the Act comes into force and remains in force until it is amended or revoked.

# 1. Infection Prevention and Control (IPAC) Program

**Act/Regulation:** The Act requires every licensee of a long-term care home to ensure that there is an IPAC program for the home (s. 23(1) of Act). The licensee shall also implement any standard or protocol issued by the Director with respect to IPAC (s. 102(2)(b) of the Regulation).

The licensee shall ensure that all staff participate in the implementation of the program, including, for greater certainty, all members of the leadership team, including the Administrator, the Medical Director, the Director of Nursing and Personal Care and the infection prevention and control lead (s. 102(8) of the Regulation).

## **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**1.1** The licensee shall ensure that staff roles, responsibilities, and accountabilities related to the implementation and ongoing delivery of the IPAC program are clearly defined and communicated regularly to all staff.

## **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**1.2** The licensee shall keep written records of the process described in requirement 1.1 (definition and communication of staff roles and responsibilities) and shall ensure that the record is kept in a readable and useable format that allows a complete copy of the record to be readily produced.

## **What is an IPAC Program?**

An IPAC program is generally defined as: an organized set of activities, processes and services for infection prevention and control which is administered by people with IPAC training and expertise in the organization.

### **\*Goals of IPAC Programs:**

To optimize safety in the LTC home to mitigate risk of resident infections and to reduce morbidity and mortality; and

To prevent the spread of infections among those inside the home (including residents, staff and others) and transmission from the community into the home.

(\*Adapted from IPAC Canada, 2016)

## Components of the IPAC program

Based on the Act, O. Reg. 246/22 and this Standard, each licensee shall ensure that the IPAC program includes, but is not limited to, the required components noted in the table below.

<b>Program component</b>
a) IPAC Lead and interdisciplinary team
b) Evidence-based policies and procedures
c) Training and education
d) <b>ADDITIONAL REQUIREMENT UNDER THE STANDARD:</b> Routine Practices and Additional Precautions
e) Infectious Disease Surveillance
f) Outbreak Management (OM) system
g) Hand Hygiene program
h) <b>ADDITIONAL REQUIREMENT UNDER THE STANDARD:</b> Personal Protective Equipment (PPE)
i) Quality program and evaluation
j) <b>ADDITIONAL REQUIREMENT UNDER THE STANDARD:</b> Ethical framework
k) Application of the precautionary principle

## 2. IPAC Resources

### Requirement for IPAC Lead

**Act/Regulation:** The licensee of a long-term care home shall ensure that the home has an IPAC Lead whose primary responsibility is the home's infection prevention and control program (s. 23(4) of the Act). The responsibilities of the IPAC Lead are detailed in s.102(7) of the Regulation.

As required by the Regulation, the licensee shall ensure that the IPAC Lead works regularly in that position on site at the home for at least the following **minimum hours:**

- For homes with a licensed bed capacity of 69 beds or fewer (smaller homes), **at least** 17.5 hours per week.
- For homes with a licensed bed capacity of more than 69 beds but less than 200 beds, **at least** 26.25 hours per week.
- For homes with a licensed bed capacity of 200 beds or more, **at least** 35 hours per week. (s.102(15) of the Regulation).

**Explanatory Note:**

IPAC programming and required resources, including resources available on a specific shift, must be sufficient to address home and resident factors such as: age of the home; layout; and resident complexity and/or vulnerability, as these may directly impact IPAC practices.

As well, the role should be prioritized and resourced in a manner that ensures that the required roles and responsibilities can be performed; including daily surveillance.

### Education of the IPAC Lead

**Act/Regulation:** The IPAC Lead shall have, at a minimum, education and experience in IPAC practices, including:

- a) Infectious diseases;
- b) Cleaning and disinfection;
- c) Data collection and trend analysis;
- d) Reporting protocols;
- e) Outbreak management;
- f) Asepsis;
- g) Microbiology;
- h) Adult education;
- i) Epidemiology;
- j) Program management; and
- k) Within three years of s.102(6) of the Regulation coming into force, the IPAC Lead shall have current certification in infection control from the Certification Board of Infection Control and Epidemiology (ss.102(5) and 102(6) of the Regulation).

# Responsibilities of the IPAC Lead

**Act/Regulation:** As detailed in section 102(7) of the Regulation, every licensee shall ensure that the IPAC Lead carries out the following responsibilities as well as those also required under this Standard, as described below:

1. Working with the interdisciplinary IPAC team to implement the IPAC program;
2. Managing and overseeing the IPAC program;
3. Overseeing the delivery of IPAC education to all staff, caregivers, volunteers, visitors, and residents;
4. Auditing of IPAC practices in the home (please note that auditing of IPAC practices can also include overseeing audit activities performed by other staff in the home in collaboration with, or under the direction of, the IPAC lead);

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.1** The licensee shall ensure that the IPAC Lead conducts at a minimum, quarterly real-time audits of specific activities performed by staff in the home, including but not limited to, hand hygiene, selection and donning and doffing of PPE.

5. Conducting regular infectious disease surveillance;

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.2** The licensee shall ensure that the IPAC Lead reviews infectious disease surveillance results regularly to ensure that all staff are conducting infectious disease surveillance appropriately and to ensure that appropriate action is being taken to respond to surveillance findings.

6. Convening the Outbreak Management Team (OMT) at the outset of an outbreak and regularly throughout an outbreak;
7. Convening the interdisciplinary IPAC team at least quarterly, and at a more frequent interval during an infectious disease outbreak in the home (this may also include convening the team during other disease outbreaks (i.e, non-infectious);
8. Reviewing the symptom screening gathered pursuant to subsection 102(9) of the Regulation;
9. Reviewing daily and monthly screening results collected by the licensee to determine whether any action is required;
10. Implementing required improvements to the IPAC program as required by audits or by the licensee; and

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.3** The licensee shall ensure that the IPAC Lead, in collaboration with the interdisciplinary IPAC team, implements required improvements to address any evaluation and/or audit findings as well as recommendations arising from the quality program for IPAC.

11. Ensuring that there is in place a hand hygiene program in accordance with this standard which includes, at a minimum, access to hand hygiene agents at point-of-care (s.102(7) of the Regulation).

## Contact information for the IPAC Lead:

**Act/Regulation:** The licensee shall ensure that the direct contact information, including a telephone number and an email address that are monitored regularly, of all IPAC Leads for the home are provided:

- a) To the local medical officer of health appointed under the *Health Protection and Promotion Act* or their designate; and
- b) Where there exists a person or entity that is designated as the relevant IPAC hub for the home under a funding agreement with the Ministry of Health, to that IPAC hub (s.102(19) of the Regulation).

## Additional IPAC Staff:

**Act/Regulation:** The licensee of a long-term care home shall consider the complexity and vulnerability of their resident population in the home and shall determine if the infection prevention and control lead is required to work more than the minimum number of hours in the home required by subsection 102 (15) of the Regulation, or whether to designate additional IPAC Leads as required. (s.102(16) Regulation).

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.4** The licensee shall ensure that the IPAC program is appropriately resourced, including that additional staff with education in IPAC are available to provide support to the IPAC Lead, as needed, on every shift.

**Note:** The designation of an additional IPAC Lead, or other supporting staff, does not relieve the licensee from the obligation to ensure that the designated lead works the minimum number of hours required by the Regulation.

# Consultation with the Medical Director and other Healthcare Professionals

**Act/Regulation:** The licensee shall ensure that an interdisciplinary infection prevention and control team that includes the infection prevention and control lead, the Medical Director, the Director of Nursing and Personal Care and the Administrator co-ordinates and implements the program (s.102(4)(b) of the Regulation).

The licensee shall ensure that all staff participate in the implementation of the IPAC program, including, for greater certainty, all members of the leadership team, including the Administrator, the Medical Director, the Director of Nursing and Personal Care and the infection prevention and control lead (s.102(8) of the Regulation).

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.5** The licensee shall ensure that the IPAC Lead consults with the Medical Director and other healthcare professionals in the home which shall include at a minimum, consulting with the Medical Director on policies and procedures for the IPAC program that impact medical care.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.6** The licensee shall ensure that the IPAC Lead seeks advice from the interdisciplinary IPAC team and other health care professionals in the home (e.g. dietician, occupational therapist) on specific policies and procedures of the IPAC program, in particular those that directly impact resident care.

## Interdisciplinary IPAC Team

**Act/Regulation:** The licensee shall ensure,

- a) That there is an interdisciplinary team approach in the co-ordination and implementation of the IPAC program;
- b) That an interdisciplinary infection prevention and control team that includes the infection prevention and control lead, the Medical Director, the Director of Nursing and Personal Care and the Administrator co-ordinates and implements the program;
- c) That the interdisciplinary infection prevention and control team meets at least quarterly and on a more frequent basis during an infectious disease outbreak in the home; and
- d) That the local medical officer of health appointed under the *Health Protection and Promotion Act* or their designate is invited to the meetings (s.102(4)(a)-(d) of the Regulation).



**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.7** The licensee shall ensure that the interdisciplinary team approach in the co-ordination and implementation of the IPAC program includes engagement with:

- a) The home's Occupational Health and Safety (OHS) lead, or other individual with OHS responsibility for the home, where an OHS lead is not in place, and the Joint Health and Safety Committee (JHSC) or health and safety representative;
- b) The Residents' Council and Family Council, if any, on a regular basis (at least quarterly) to seek advice on IPAC measures and their impacts on residents and families/caregivers; and
- c) The Residents' Council and Family Council, if any, on the IPAC program evaluation and quality activities. This shall include the Council(s) providing advice on program improvements.

## Ethical Framework

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.8** The licensee shall ensure that the implementation and ongoing delivery of the IPAC program includes an ethical framework to inform decision-making.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.9** The licensee shall ensure that a clearly documented ethical framework is included as part of the IPAC program. The ethical framework must include key principles which have been discussed and developed in collaboration with the interdisciplinary IPAC team, the home's leadership team (where not already represented on the interdisciplinary IPAC team), the continuous quality improvement committee (once established), and the Residents' Council or Family Council, if any.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.10** The licensee shall ensure that the ethical framework for the IPAC program includes the following key principles:

- Fairness;
- Equity;
- Transparency;
- Consideration of available evidence;
- Consideration of impacts of decisions on residents and staff;
- Resident quality of life as a primary driver;
- Risk relative to reward of key decisions; and
- Safety.

# Precautionary Principle

**Act/Regulation:** The licensee shall ensure that the IPAC program is implemented in a manner consistent with the precautionary principle as set out in the standards and protocols issued by the Director and the most current medical evidence (s.102(4)(g) of the Regulation).

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.11** The licensee shall ensure that the application of the precautionary principle is guided by the key principles in the ethical framework.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.12** The licensee shall ensure that when determining whether to apply the Precautionary Principle, they consider recommendations including those of a provincial scientific table, and the Chief Medical Officer of Health appointed under the *Health Protection and Promotion Act*, where available.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**2.13** The licensee shall ensure that processes are established for the de-escalation of practices where the precautionary principle has been applied.

The licensee shall ensure that as part of this process, the OHS lead, Joint Health and Safety Committee (JHSC), or health and safety representative, and the interdisciplinary IPAC team are engaged.

***What is meant by escalation and de-escalation of practices?***

The decision to apply the precautionary principle can include making a risk-based decision to transition from routine practices to additional precautions (escalation). Requirement 2.13 refers to the need for a plan for the de-escalation of practices where this has been done related to the application of the precautionary principle.

Please see the following document that discusses de-escalation of COVID-19 control measures, for example.

[De-escalation of COVID-19 Outbreak Control Measures in Long-term Care and Retirement Homes \(publichealthontario.ca\)](https://www.publichealthontario.ca)

### 3. Surveillance

**Act/Regulation:** The licensee shall implement any surveillance protocols issued by the Director for a particular communicable disease or disease of public health significance (s.102(2)(a) of the Regulation).

The licensee shall ensure that on every shift,

- a) Symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director; and
- b) The symptoms are recorded and that immediate action is taken to reduce transmission and isolate residents and place them in cohorts as required (s.102(9) of the Regulation).

The licensee shall ensure that the symptom screening information gathered under subsection 102(9) of the Regulation is analyzed daily to detect the presence of infection and reviewed at least monthly to detect trends, for the purpose of reducing the incidence of infection and outbreaks (s.102(10) of the Regulation).

The infection prevention and control program must also include daily monitoring to detect the presence of infection in residents (s. 23 (2) (c)) of the Regulation).

#### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**3.1** The licensee shall ensure that the following surveillance actions are taken:

- a) Training staff on how to monitor for the presence of infection in residents;
- b) Ensuring that surveillance is performed on every shift to identify cases of healthcare acquired infections (HAIs), device-associated infections and Antibiotic Resistant Organisms (AROs);
- c) Ensuring that established case definitions for specific diseases are understood and used by staff;
- d) Using common forms and tools, and making them available to staff at locations where they are needed, for surveillance reporting in the home;
- e) Developing and using a surveillance database and reporting tool for use in the home (e.g., Microsoft Excel spreadsheet or other tool) to collect and collate data;
- f) Ensuring that surveillance information is tracked and entered into the surveillance database and/or reporting tools;
- g) Ensuring that staff are aware of requirements for infectious disease reporting within the home;
- h) Ensuring that the interdisciplinary IPAC team is regularly updated on surveillance findings; and
- i) Employing syndromic surveillance regularly to monitor for symptoms, including but not limited to, fever new coughs, nausea, vomiting, and diarrhea, and taking appropriate action.

## 4. Outbreak Preparedness and Management

**Act/Regulation:** The licensee shall ensure that there are in place, an outbreak management system for detecting, managing, and controlling infectious disease outbreaks, including defined staff responsibilities, reporting protocols based on requirements under the *Health Protection and Promotion Act*, communication plans, and protocols for receiving and responding to health alerts; and a written plan for responding to infectious disease outbreaks (s. 102(11) of the Regulation).

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**4.1** The licensee shall ensure that the outbreak management system includes:

- a) Organizational risk assessments;
- b) Outbreak management policies, procedures and protocols;
- c) Assigned outbreak management team (OMT) and staff roles and responsibilities;
- d) Approaches to engage residents, staff, and caregivers;
- e) Approaches to engage with the local \*board of health;
- f) Reporting protocols based on the home's critical incident system;
- g) Protocols for testing, screening for infection and cohorting, as required;
- h) Processes for accessing additional supports if required (e.g. through the IPAC hubs, public health units, other);
- i) Strategies to address various modes of disease transmission in outbreaks;
- j) Processes to ensure that staff have the knowledge and ability to transfer outbreak information from shift to shift for continuity and continuous monitoring of disease and outbreak status; and
- k) Processes to consider the unique features of the home in the outbreak management plan such as:
  - The size and physical layout of the home including rooms available for separating and/or cohorting residents;
  - Staffing supply, mix, and models;
  - Resident population and unique needs and/or features;
  - Impacts of outbreaks on residents including impacts of social isolation;
  - Cultural safety; and
  - Community impacts.

\*Please note that public health unit is a colloquial name used for boards of health which are defined under the *Protection and Promotion Act, 1990*.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**4.2** The licensee shall ensure that the IPAC Lead is involved in outbreak management activities in collaboration with the interdisciplinary IPAC team and the OMT in the manner described below.

The IPAC Lead's role shall include, but not be limited to:

- a) Advising on IPAC practices to manage the outbreak and minimize risk(s) to residents and staff;
- b) Assisting with securing IPAC-related resources needed to support the outbreak management response. This may also include working in collaboration with the licensee and the OMT to secure needed PPE and other supplies as required;
- c) Ensuring that accurate disease-related information is tracked and documented;
- d) Engaging with the local board of health on the outbreak response (when relevant) including when an outbreak has been declared;
- e) Implementing changes to IPAC practices as needed to support the outbreak response; and
- f) Providing IPAC-related education and training to staff and others to support the outbreak response.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**4.3** The licensee shall ensure that following the resolution of an outbreak, the OMT and the interdisciplinary IPAC team conduct a debrief session to assess IPAC practices that were effective and ineffective in the management of the outbreak. A summary of findings shall be created that makes recommendations to the licensee for improvements to outbreak management practices.

## 5. IPAC Policies and Procedures

**Act/Regulation:** The IPAC program must include evidence-based policies and procedures (s.23(2)(a) of the Act).

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**5.1** The licensee shall ensure that the IPAC Lead works with the interdisciplinary IPAC team as well as affected departments in the home, including but not limited to: housekeeping; environmental health, occupational health and safety; and clinical leadership (where not already represented on the interdisciplinary IPAC team), to develop a comprehensive inventory of evidence-based policies and procedures for the IPAC program.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**5.2** The licensee shall ensure that the IPAC policies and procedures are reviewed at least annually for completeness, accuracy, and alignment with evidence and with best practice, and are updated based on that review.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**5.3** The licensee shall ensure that the policies and procedures for the IPAC program include policies and procedures for the implementation of Routine Practices and Additional Precautions including but not limited to:

- a) Point of Care Risk Assessments;
- b) Respiratory Etiquette;
- c) Contact transmission and precautions;
- d) Droplet transmission and precautions;
- e) Airborne transmission and precautions;
- f) Combinations of Additional Precautions;
- g) Management of antibiotic-resistant organisms (AROs); and
- h) Cleaning and disinfection.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**5.4** The licensee shall ensure that the policies and procedures for the IPAC program also address:

- a) Safe administration and handling of medications, including safe handling of needles and other sharps (related to IPAC practices specifically);
- b) Reprocessing of medical equipment both offsite and onsite. This shall include the requirement for offsite processing to be performed by a licensed provider;
- c) Surveillance and screening activities including data collection and reporting;
- d) Personal protective equipment (PPE), including training and education related to appropriate selection, and use as well as a plan for appropriate stewardship;
- e) Policies and procedures for the hand hygiene program as a component of the overall IPAC program;
- f) Policies and procedures for disease-specific management;
- g) IPAC related practices for aerosol generating medical procedures (AGMPs);
- h) Staff training and education requirements;
- i) Culturally safe and appropriate IPAC practices;
- j) Assessment, review, and evaluation of environmental cleaning products;
- k) IPAC policies for housekeeping, laundry, cleaning, and disinfecting;
- l) Waste management;
- m) Facility maintenance standards for heating, ventilation, and air conditioning (related to IPAC specifically);
- n) IPAC policies and procedures for food services including:
  - i. Food storage;
  - ii. Food preparation; and
  - iii. Food handling
- o) Program audit activities; and
- p) Program evaluation and quality improvement.

\*Policies and procedures may be combined/grouped as appropriate.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**5.5** The licensee shall identify how IPAC policies and procedures will be implemented in the home.

## 6. Personal Protective Equipment (PPE)

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**6.1** The licensee shall make PPE available and accessible to staff and residents, appropriate to their role and level of risk. This shall include having a PPE supply and stewardship plan in place and ensuring adequate access to PPE for Routine Practices and Additional Precautions. The licensee shall ensure that the PPE supply and stewardship plan is consistent with any relevant Directives and/or Guidance, regarding appropriate PPE use, from the Chief Medical Officer of Health or the Minister of Long-Term Care, which may be in place.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**6.2** The licensee shall ensure that training is provided to staff on the appropriate selection, application, removal, and disposal of PPE.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**6.3** The licensee shall ensure that training and assistance, appropriate to their needs and level of understanding, is provided to residents, related to use of PPE.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**6.4** The licensee shall ensure that individuals have access to fit-testing where fit-testing is required for specific equipment.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**6.5** The licensee shall ensure that the IPAC Lead is involved in the review, selection and purchasing of PPE, as required.

### **What is PPE Stewardship?**

PPE stewardship includes all aspects of managing PPE in the home. This includes; ensuring adequate supply; making choices about distribution, and ensuring that PPE is selected, used and disposed of properly. It should also include ensuring that PPE is selected and used in an evidence-based manner.

[Optimizing the Supply of Personal Protective Equipment During the COVID-19 Pandemic \(ontariohealth.ca\)](https://www.ontariohealth.ca/en/optimizing-the-supply-of-personal-protective-equipment-during-the-covid-19-pandemic)



## 7. Training and Education

**Act/Regulation:** The IPAC program is required to include an educational component in respect of infection prevention and control for staff, residents, volunteers and caregivers (Act ss. 23(2)(b)). Licensees should also refer to other requirements in sections 257-263 of the Regulation).

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**7.1** The licensee shall ensure that the IPAC Lead develops and oversees the implementation of an IPAC training and education program for residents, caregivers, staff and visitors which includes at a minimum the following:

- a) Caregivers shall receive orientation and training on IPAC policies and procedures appropriate to their role;
- b) Residents shall also receive training, education, and/or information appropriate to their needs and level of understanding that helps them to understand the IPAC program and specific IPAC practices that may affect them;
- c) The licensee shall communicate relevant IPAC information and requirements and provide education to residents, caregivers and other visitors (including family members), which includes but is not limited to: visitor policies, physical distancing, respiratory etiquette, hand hygiene, applicable IPAC practices, and proper use of PPE;
- d) The licensee shall provide IPAC retraining and education on an annual basis or more frequently, to respond to emerging public health issues and/or new evidence;
- e) Training shall be accessible, tailored to learner needs and reduce potential barriers to comprehension including language and literacy; and
- f) The licensee shall also ensure that visitors receive information about required IPAC practices that is appropriate to the level of risk that visitors present to themselves and to others in the home.

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### ***What is respiratory etiquette?***

Respiratory etiquette refers to personal practices that help prevent the spread of bacteria and viruses that cause acute respiratory infections (e.g., covering the mouth when coughing, care when disposing of tissues).

Ontario Agency for Health Protection and Promotion (Public Health Ontario), Provincial Infectious Diseases Advisory Committee. Best practices for prevention, surveillance and infection control management of novel respiratory infections in all health care settings. 1 st revision. Toronto, ON: Queen's Printer for Ontario; 2020.

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**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**7.2** The licensee shall ensure that the IPAC Lead develops and oversees the implementation of an IPAC training and education program for staff and volunteers required by the Act and Regulation which has the following minimum requirements:

- a) The required orientation and training on IPAC under the Act and Regulation shall be appropriate to the staff and volunteer role;
- b) The training shall be accessible, tailored to learner needs and reduce potential barriers to comprehension including language and literacy;
- c) IPAC education shall be tailored to the job of the staff member receiving the education. For example, environmental cleaning, allied health staff, food service workers, laundry services; and
- d) The JHSC or health and safety representative shall be engaged in the development of training and education relevant to worker safety.

**ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**7.3** The licensee shall ensure that the IPAC Lead plans, implements, and tracks the completion of all IPAC training and:

- a) Assessments/audits and feedback processes are used to determine if staff have met training requirements as required by the Act and Regulation, or when individual staff need remedial or refresher training; and
- b) Ensures that audits are performed regularly (at least quarterly) to ensure that all staff can perform the IPAC skills required of their role.

## 8. Regular Evaluation and Quality Improvement

**Act/Regulation:** The licensee shall oversee the development and implementation of a quality management program to assess and improve IPAC in the home, as set out in a standard or protocol issued by the Director under subsection 102(2) of the Regulation (s. 102(18) of the Regulation).

The licensee shall ensure that the IPAC program is evaluated and updated at least annually in accordance with the standards and protocols issued by the Director under subsection 102(2) and (s. 102(4)(e)) of the Regulation. The licensee shall also ensure that a written record is maintained for each evaluation including evaluation dates and time period, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**8.1** In evaluating and updating the IPAC program, at a minimum on an annual basis, the licensee shall:

- a) In addition to the requirement to ensure that the IPAC program is evaluated and updated at least annually, ensure that the IPAC program, including the IPAC policies and procedures, are reviewed and updated, more frequently in accordance with emerging evidence and best practices;
- b) Ensure that the evaluation of the IPAC program also includes specific actions to evaluate outbreak preparedness and response activities;
- c) Ensure that evaluation approaches also include, at a minimum:
  - i. A system to monitor the compliance of staff with IPAC program policies and procedures, as well as processes for correcting and improving identified gaps;
  - ii. An audit plan, including audit processes for on-site review of IPAC practices by staff with education and corrective actions; and
  - iii. Engagement with the Quality Committee to appropriately link program evaluation with Quality initiatives.
- d) Ensure that quality reviews shall also be conducted annually in collaboration with home leadership, the Quality Committee, the IPAC Lead, and the interdisciplinary IPAC team.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**8.2** The licensee shall ensure at minimum, that the following activities are carried out in the quality management program:

- a) Establishment of goals and key quality indicators (both process and outcome-related) for the IPAC program in the home;
- b) Training and education for staff related to quality indicators and needed improvements for IPAC in the home;
- c) Reporting on quality indicators and metrics for IPAC in the home; and
- d) Engagement with the Quality Committee, the interdisciplinary IPAC team and family and resident councils related to IPAC in the home.

## 9. Routine Practices and Additional Precautions

### ADDITIONAL REQUIREMENT UNDER THE STANDARD:

**9.1** The licensee shall ensure that Routine Practices and Additional Precautions are followed in the IPAC program.

At minimum Routine Practices shall include:

- a) The use of infectious disease risk assessments including point of care risk assessments;
- b) Hand hygiene, including, but not limited to, at the four moments of hand hygiene (before initial resident/resident environment contact; before any aseptic procedure; after body fluid exposure risk, and after resident/resident environment contact);
- c) Respiratory etiquette;
- d) Proper use of PPE, including appropriate selection, application, removal, and disposal; and
- e) Use of controls, including:
  - i. Environmental controls, including but not limited to, location/placement of residents' equipment, cleaning, making hand hygiene products available;
  - ii. Engineering controls, including but not limited to, use of safety-engineered needles point-of-care sharps containers, disposable equipment, barriers; and
  - iii. Administrative controls, including but not limited to, comprehensive IPAC policies and procedures.

At minimum, Additional Precautions shall include:

- a) Evidence-based practices related to potential contact transmission and required precautions;
- b) Evidence-based practices related to potential droplet transmission and required precautions;
- c) Evidence-based practices related to airborne transmission and required precautions;
- d) Evidence-based practices for combined precautions;
- e) Point-of-care signage indicating that enhanced IPAC control measures are in place;
- f) Additional PPE requirements including appropriate selection application, removal and disposal;
- g) Modified or enhanced environmental cleaning procedures; and
- h) Communication regarding Additional Precautions with transport of residents to other facilities (e.g. hospital).

For more detailed information on Routine Practices and Additional Precautions, please refer to Public Health Ontario's [Routine Practices and Additional Precautions \(PIDAC, 2012\)](#).

And/or - Public Health Agency of Canada

[Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings - Canada.ca](#)

## 10. Hand Hygiene Program

**Act/Regulation:** The licensee is required to implement a hand hygiene program (s. 23(2)(e) of the Act). The licensee is required to ensure that there is in place a hand hygiene program in accordance with any standard or protocol issued by the Director under s. 102(2) of the Regulation, which includes, at a minimum, access to hand hygiene agents at point-of-care (para 11 of s. 102(7) of the Regulation).

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**10.1** The licensee shall ensure that the hand hygiene program includes access to hand hygiene agents, including 70-90% Alcohol-Based Hand Rub (ABHR). These agents shall be easily accessible at both point-of care and in other resident and common areas, and any staff providing direct resident care must have immediate access to 70-90% ABHR.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**10.2** The hand hygiene program shall be multifaceted and multidisciplinary. The licensee shall ensure that the program includes, at minimum, training and education, hand hygiene audits, a hand care program, and hand hygiene and hand care support for residents.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**10.3** Hand washing facilities provisioned with appropriate supplies must also be accessible in common areas and work areas where hand washing may be required.

### **ADDITIONAL REQUIREMENT UNDER THE STANDARD:**

**10.4** The Licensee shall ensure that the hand hygiene program also includes policies and procedures, as a component of the overall IPAC program, as well as:

- a) Hand hygiene signage;
- b) Training and education related to hand hygiene practices at the four moments of hand hygiene (before initial resident/resident environment contact; before any aseptic procedure; after body fluid exposure risk, and after resident/resident environment contact);
- c) Identification and engagement of hand hygiene champions in the home to promote best practice; audits to monitor hand hygiene compliance including feedback and correction of practices when indicated;
- d) These activities shall be linked to the overall audit, evaluation, and quality approach for the full IPAC program:

- i. This shall also include monthly audits of adherence to the four moments of hand hygiene by staff;
- e) A hand care program to assess and maintain the skin integrity of staff who perform frequent hand hygiene;
- f) Hand hygiene training and awareness as part of orientation and ongoing training of all staff, volunteers and visitors (including caregivers and family members);
- g) Involvement of the IPAC Lead and OHS staff in product selection for hand hygiene and skin maintenance, to ensure that PPE durability is not compromised (e.g., interaction of hand care products and the break-down of latex gloves);
- h) Support for residents to perform hand hygiene prior to receiving meals and snacks, and after toileting; and
- i) Support for residents who have difficulty completing hand hygiene due to mobility, cognitive or other impairments.

**Please also refer to Just Clean Your Hands**

[Just Clean Your Hands – Long-term Care | Public Health Ontario](#)

# 11. Immunization and Screening

**Act/Regulation** The licensee shall ensure that the following immunization and screening measures are in place:

- a) Each resident admitted to the home must be screened for tuberculosis within 14 days of:
  - i. Admission unless the resident has already been screened at some time in the 90 days prior to admission and the documented results of this screening are available to the licensee;
- b) Residents must be offered immunization against influenza at the appropriate time each year;
- c) Residents must be offered immunizations against pneumococcus, tetanus and diphtheria in accordance with the publicly funded immunization schedules posted on the website of the Ministry of Health;
- d) Staff is screened for tuberculosis and other infectious diseases in accordance with any standard or protocol issued by the Director;
- e) There must be a staff immunization program in accordance with any standard or protocol issued by the Director;
- f) A licensee is exempt from screening for TB with respect to a resident:
  - i. Who is being relocated to another long-term care home operated by the same licensee and section 240 of the Regulation applies; or
  - ii. Who is transferring to a related temporary long-term care home, a re-opened long-term care home or a replacement long-term care home operated by the same licensee;
- g) The licensee shall ensure that any pets living in the home or visiting the home have up-to-date immunizations. (Regulation ss 102(12)-(14)).

## **ADDITIONAL REQUIREMENTS UNDER THE STANDARD:**

**11.1** The licensee shall work collaboratively with the local board of health regarding immunization of residents and staff, which may include offering immunizations onsite. This may also include offering additional immunizations as recommended by the local board of health.

As well, the licensee shall implement a staff immunization program that includes informational resources regarding the benefits of immunization to resident and staff safety. This shall also include communicating expectations regarding immunization at hiring (for example, regarding recommended immunizations such as Measles/Mumps/Rubella (MMR) and yearly influenza immunization).

**11.2** The licensee shall ensure that staff is screened for tuberculosis and other infectious diseases. This shall include ensuring accordance with evidence-based practices and where there are none, accordance with prevailing practices. This may also include consultation with the local board of health to ensure that screening is undertaken to address specific risks in the community.

Licensees may wish to refer to the Canadian TB Standards for guidance related to TB Screening

[Canadian Tuberculosis Standards 7th Edition: 2014 - Canada.ca](#)

## Appendix 1: FLTCA 2021:

Item
<p>23 (1) Every licensee of a long-term care home shall ensure that there is an infection prevention and control program for the home.</p> <p>(2) The infection prevention and control program must include,</p> <ul style="list-style-type: none"><li>(a) evidence-based policies and procedures;</li><li>(b) an educational component in respect of infection prevention and control for staff, residents, volunteers, and caregivers;</li><li>(c) daily monitoring to detect the presence of infection in residents of the long-term care home;</li><li>(d) measures to prevent the transmission of infections;</li><li>(e) a hand hygiene program; and</li><li>(f) any additional matters provided for in the regulations.</li></ul> <p>(3) The licensee shall ensure that the infection prevention and control program and what is provided for under that program, including the matters required under subsection (2), comply with any standards and requirements, including required outcomes and accountability measures, provided for in the regulations.</p> <p>(4) Except as provided for in the regulations, every licensee of a long-term care home shall ensure that the home has an infection prevention and control lead whose primary responsibility is the home's infection prevention and control program.</p> <p>(5) Every licensee of a long-term care home shall ensure that the infection prevention and control lead possesses the qualifications provided for in the regulations.</p>



## Appendix 2: Ontario Regulation 246/22 under the *FLTCA*: s. 102

### Infection prevention and control program

- (1) Every licensee of a long-term care home shall ensure that the infection prevention and control program required under subsection 23 (1) of the Act complies with the requirements of this section.
- (2) The licensee shall implement,
  - (a) any surveillance protocols issued by the Director for a particular communicable disease or [disease of public health significance](#); and
  - (b) any standard or protocol issued by the Director with respect to infection prevention and control.
- (3) The Director shall update the standards and protocols mentioned in subsection (2) regularly to reflect relevant evidence and best practice.
- (4) The licensee shall ensure,
  - (a) that there is an interdisciplinary team approach in the co-ordination and implementation of the program;
  - (b) that an interdisciplinary infection prevention and control team that includes the infection prevention and control lead, the Medical Director, the Director of Nursing and Personal Care and the Administrator co-ordinates and implements the program;
  - (c) that the interdisciplinary infection prevention and control team meets at least quarterly and on a more frequent basis during an infectious disease outbreak in the home;
  - (d) that the local medical officer of health [appointed under the Health Protection and Promotion Act](#) or their designate is invited to the meetings;
  - (e) that the program is evaluated and updated at least annually in accordance with the standards and protocols issued by the Director under subsection (2);
  - (f) that a written record is kept relating to each evaluation under clause (e) that includes the date of the evaluation, the names of the persons who participated in the evaluation, a summary of the changes made and the date that those changes were implemented; and
  - (g) that the program is implemented in a manner consistent with the precautionary principle as set out in the standards and protocols issued by the Director under subsection (2) and the most current medical evidence.
- (5) The licensee shall designate a staff member as the infection prevention and control lead who has education and experience in infection prevention and control practices, including,
  - (a) infectious diseases;
  - (b) cleaning and disinfection;
  - (c) data collection and trend analysis;
  - (d) reporting protocols;
  - (e) outbreak management;

- (f) asepsis;
- (g) microbiology;
- (h) adult education;
- (i) epidemiology;
- (j) program management; and
- (k) current certification in infection control from the Certification Board of Infection Control and Epidemiology.

(6) A licensee is not required to comply with the qualification requirements for the infection prevention and control lead under clause (5) (k) until three years after this section comes into force.

(7) The licensee shall ensure that the infection prevention and control lead designated under subsection carries out the following responsibilities in the home:

- a. Working with the interdisciplinary team to implement the infection prevention and control program.
- b. Managing and overseeing the infection prevention and control program.
- c. Overseeing the delivery of infection prevention and control education to all staff, caregivers, volunteers, visitors and residents.
- d. Auditing of infection prevention and control practices in the home.
- e. Conducting regular infectious disease surveillance.
- f. Convening the Outbreak Management Team at the outset of an outbreak and regularly throughout an outbreak.
- g. Convening the interdisciplinary infection prevention and control team referred to in subsection (4) at least quarterly, and at a more frequent interval during an infectious disease outbreak in the home.
- h. Reviewing the information gathered pursuant to subsection (9).
- i. Reviewing any daily and monthly screening results collected by the licensee to determine whether any action is required.
- j. Implementing required improvements to the infection prevention and control program as required by audits under paragraph 4 or by the licensee.
- k. Ensuring that there is in place a hand hygiene program in accordance with any standard or protocol issued by the Director under subsection (2) which includes, at a minimum, access to hand hygiene agents at point-of-care.

(8) The licensee shall ensure that all staff participate in the implementation of the program, including, for greater certainty, all members of the leadership team, including the Administrator, the Medical Director, the Director of Nursing and Personal Care and the infection prevention and control lead.

(9) The licensee shall ensure that on every shift,

- (a) symptoms indicating the presence of infection in residents are monitored in accordance with any standard or protocol issued by the Director under subsection (2); and
- (b) the symptoms are recorded and that immediate action is taken to reduce transmission and isolate residents and place them in cohorts as required.

(10) The licensee shall ensure that the information gathered under subsection (9) is analyzed daily to detect the presence of infection and reviewed at least once a month to detect trends, for the purpose of reducing the incidence of infection and outbreaks.

(11) The licensee shall ensure that there are in place,

(a) an outbreak management system for detecting, managing, and controlling infectious disease outbreaks, including defined staff responsibilities, reporting protocols based on requirements under the *Health Protection and Promotion Act*, communication plans, and protocols for receiving and responding to health alerts; and

(b) a written plan for responding to infectious disease outbreaks.

(12) The licensee shall ensure that the following immunization and screening measures are in place:

1. Each resident admitted to the home must be screened for tuberculosis within 14 days of admission unless the resident has already been screened at some time in the 90 days prior to admission and the documented results of this screening are available to the licensee.

2. Residents must be offered immunization against influenza at the appropriate time each year.

3. Residents must be offered immunizations against pneumococcus, tetanus and diphtheria in accordance with the publicly funded immunization schedules posted on the website of the Ministry of Health.

4. Staff is screened for tuberculosis and other infectious diseases in accordance with any standard or protocol issued by the Director under subsection (2).

5. There must be a staff immunization program in accordance with any standard or protocol issued by the Director under subsection (2).

(13) A licensee is exempt from paragraph 1 of subsection (12) with respect to a resident,

(a) who is being relocated to another long-term care home operated by the same licensee and section 240 applies; or

(b) who is transferring to a related temporary long-term care home, a re-opened long-term care home or a replacement long-term care home operated by the same licensee.

(14) The licensee shall ensure that any pets living in the home or visiting the home have up-to-date immunizations.

(15) Subject to subsection (16), every licensee of a long-term care home shall ensure that the infection prevention and control lead designated under this section works regularly in that position on site at the home for the following amount of time per week:

1. In a home with a licensed bed capacity of 69 beds or fewer, at least 17.5 hours per week.

2. In a home with a licensed bed capacity of more than 69 beds but less than 200 beds, at least 26.25 hours per week.

3. In a home with a licensed bed capacity of 200 beds or more, at least 35 hours per week.

(16) Every licensee of a long-term care home shall consider the complexity and vulnerability of their resident population in the home and shall determine if the infection prevention and control lead is required to work more than the minimum number of hours required by subsection (15) or whether to designate additional infection prevention and control leads as required.

(17) The designation of an additional infection prevention and control lead under subsection (16) does not relieve the licensee with respect to its obligation to ensure the minimum hours worked in subsection (15) by the infection prevention and control lead.

(18) The licensee shall oversee the development and implementation of a quality management program to assess and improve infection prevention and control in the home, as set out in a standard or protocol issued by the Director under subsection (2).

(19) Every licensee of a long-term care home shall ensure that the direct contact information, including a telephone number and email address that are monitored regularly, of all infection prevention and control leads for the home are provided,

(a) to the local medical officer of health appointed under *the Health Protection and Promotion Act* or their designate; and

(b) where there exists a person or entity that is designated as the relevant IPAC hub for the home under a funding agreement with the Ministry of Health, to that IPAC hub.

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# Abbreviations

**ABHR** Alcohol-Based Hand Rub

**AGMPs** Aerosol Generating Medical Procedures

**AP** Additional Precautions

**ARI** Acute Respiratory Infection

**ARO** Antibiotic-Resistant Organism

**ASP** Antimicrobial Stewardship Program

**CIC®** Certification in Infection Control

**C.diff** Clostridioides difficile

**CPE** Carbapenemase-Producing Enterobacterales

**EMC** Emergency Management Committee

**ESBL** Extended Spectrum Beta-lactamases producing Enterobacterales

**FTE** Full-time Equivalent

**HAI** Health care-Associated Infection

**HCW** Health Care Worker

**ICP** Infection Prevention and Control Professional

**IPAC** Infection Prevention and Control

**MRSA** Methicillin-Resistant Staphylococcus aureus

**OHS** Occupational Health and Safety

**OMT** Outbreak Management Team

**PHAC** Public Health Agency of Canada

**PIDAC** Provincial Infectious Diseases Advisory Committee (Ontario)

**PPE** Personal Protective Equipment

**RP** Routine Practices

**VRE** Vancomycin-Resistant Enterococci



# Appendix B

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## ICRA Form



# Infection Control Risk Assessment (ICRA) Tool: Construction, Renovation, Maintenance and Design (CRMD)

## Section A: Project Scope

Location of construction / renovation:

Other areas and systems impacted ie. adjacent area and HVAC systems:

Project Description:  Projected Start Date:  Estimated Duration:

Project Manager:  Phone / Email:

Maintenance Department:  Phone / Email:

Department/Unit lead for impacted area:  Phone / Email:

Contractor(s):  Phone / Email:

IPAC Lead:  Phone / Email:

## Section B: Construction Activity

Select construction activity type based on project description.

- Type A:** Inspection, non-invasive activity above ceiling or in wall cavity and minor plumbing work of short durations.
- Type B:** Small scale, short duration, creates minimal dust and plumbing.
- Type C:** Work generates moderate to high level of dust, or requires demolition or removal of fixed component or assembly or requires more than 1 work shift to complete and plumbing.
- Type D:** Work generates high level of dust, or major demolition and construction requiring consecutive work shifts to complete and plumbing.

## Section C: Population and Geographical Risk Group

Select population and geographical risk group where construction activity occurs.

- Group 1:** Lowest Risk
- Group 2:** Medium Risk
- Group 3:** Medium / High Risk
- Group 4:** Highest Risk

## Section D: Classification for Infection Preventative Measures

Based on selections in section B and C, assign Preventive Measures class.

	Type A	Type B	Type C	Type D
Group 1	<input type="checkbox"/> Class 1	<input type="checkbox"/> Class 2*	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 3
Group 2	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 3	<input type="checkbox"/> Class 4
Group 3	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 3*	<input type="checkbox"/> Class 3	<input type="checkbox"/> Class 4
Group 4	<input type="checkbox"/> Class 2	<input type="checkbox"/> Class 3*	<input type="checkbox"/> Class 4	<input type="checkbox"/> Class 4

IPAC Lead Sign-off:

Project Manager Sign-off:

\*Indicates where a lower level might be used i.e. Ceiling access for investigation of minor work

## Section E: Preventive Measures Compliance Monitor

To Be Completed by IPAC

Date:	Meets Prevention Measures	Issues	Action Taken / Initials	Compliance Date:
<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>

# Infection Control Risk Assessment (ICRA) Tool: Construction, Renovation, Maintenance and Design (CRMD)

When to use this assessment tool:

Planning phase

Work phase

Commissioning phase

## Background

Establishing risk associated with a particular CRMD activity is a critical first step that informs the selection of the most appropriate preventive measures and risk mitigation strategies to ensure the safety of clinical environments and their mechanical systems (i.e., HVAC and Plumbing systems).

This ICRA tool is designed to facilitate IPAC risk assessment by guiding those overseeing CRMD work (e.g., members of a multidisciplinary project team, project lead, facilities department staff) through the identification of risk groups that may be affected by their proximity or potential exposure to the proposed CRMD work. Appropriate IPAC measures are identified by considering the nature of activity with the population and setting.

This tool is to be completed by those overseeing the work with IPAC being consulted for specific guidance on the most appropriate preventative measures for the proposed work. Therefore, the tool also establishes a link between the IPAC Lead and others involved in the construction activity, which ensures construction related health care associated infections are prevented.

## Instructions for Use

The IPAC lead must be involved in all 3 phases of CRMD activity to ensure that the appropriate preventative measures are initiated and followed.

Step 1: Fill out Section A-demographic section

Step 2: Fill out Section B by selecting the level of activity that best describes the project being planned for the health care setting.

Step 3: Fill out Section C by identifying the population and or geographical risk group that may be affected by the project because of its proximity or exposure to the construction/renovation activity.

Step 4: Fill out Section D with the appropriate IPAC measures by matching the population and geographical risk group in Section C with the Construction activity in Section B. Ensure IPAC signoff on agreed preventative measures.

Step 5: Section E should be completed by an IPAC lead during their CRMD surveillance to ensure that the preventative measures are being adhered to and that appropriate modifications are made if there are any design changes.

A copy of the ICRA tool should be sent to the IPAC lead prior to the initiation of the CRMD activity. The project team lead can print or email this fillable pdf tool.

The scope of the project may change and adaptations to the prevention measures can be made only after approval from the IPAC lead and the members of the multidisciplinary project team.

## Conclusion

This tool will provide those involved with CRMD activity a clear approach to both establishing and communicating risk associated with the work. Additionally, the tool will prompt IPAC consultation, resulting in the appropriate selection and application of preventive measures.

## Reference

CSA Group. CSA Z317.13.22: Infection control during construction, renovation and maintenance of health care facilities. Toronto, ON: CSA Group; 2022.

The information in this document is current as of July 2023.

**For more information, please visit: [publichealthontario.ca/CRMD](https://publichealthontario.ca/CRMD)**

# Appendix C

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## DSR Report for Allendale





# Asbestos Assessment

Allendale  
185 Ontario Street South, Milton,  
ON, L9T 2M4

Prepared for:

**Halton Region**  
1151 Bronte Road  
Oakville, Ontario, L6M 3L1

September 25, 2023

Pinchin File: 320580.001



**Asbestos Assessment**

Allendale , 185 Ontario Street South, Milton, ON, L9T 2M4  
Halton Region

September 25, 2023  
Pinchin File: 320580.001

**Issued to:** Halton Region  
**Issued on:** September 25, 2023  
**Pinchin File:** 320580.001  
**Issuing Office:** Hamilton, ON

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## **EXECUTIVE SUMMARY**

Halton Region (Client) retained Pinchin Ltd. (Pinchin) to conduct an asbestos building materials assessment of Allendale located at 185 Ontario Street South, Milton, ON, L9T 2M4. The assessment was performed on June 19, 2023.

The objectives of the assessment were to document the locations of asbestos-containing building materials, evaluate their condition and develop corrective action plans as required for the purposes of long-term management. The results of this assessment are not intended for construction, renovation, demolition or project tendering purposes.

The assessed area was limited to the part of the building, which consisted of all common areas and approximately 10% of the tenant units, as shown on the drawings in Appendix I.

## **SUMMARY OF FINDINGS**

Asbestos-containing materials (ACM) are present as follows:

- Butyl sealant

## **SUMMARY OF RECOMMENDATIONS**

The following is a summary of significant recommendations; refer to the body of the report for detailed recommendations:

1. Prepare an Asbestos Management Program (AMP).
2. Perform a reassessment of asbestos materials on an annual basis.
3. Perform a pre-construction assessment and remove all ACM prior to alteration or maintenance work if ACM may be disturbed by the work.
4. Follow appropriate safe work procedures when handling or disturbing asbestos.

*This Executive Summary is subject to the same standard limitations as contained in the report and must be read in conjunction with the entire report.*



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## APPENDICES

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APPENDIX V	Asbestos Material Summary Report / Sample Log
APPENDIX VI	HMIS Data Report





## 1.0 INTRODUCTION AND SCOPE

Halton Region (Client) retained Pinchin Ltd. (Pinchin) to conduct an asbestos building materials assessment of Allendale located at 185 Ontario Street South, Milton, ON, L9T 2M4.

Pinchin performed the assessment on June 19, 2023. The surveyor was accompanied by a representative of the Client during the assessment. The assessed area was occupied at the time of the assessment.

The objectives of the assessment were to document the locations of asbestos-containing building materials, evaluate their condition and develop corrective action plans as required. This assessment is only to be used for the purposes of long-term management and routine maintenance. The results of this assessment are not to be used for construction, renovation, demolition, or project tendering purposes.

### 1.1 Scope of Assessment

The assessment was performed to establish the location and type of asbestos building materials incorporated in the structure(s) and its finishes. The **assessed area** consisted of all common areas of the building (e.g. corridors, mechanical rooms, storage areas, etc.), excluding the building exterior (e.g., exterior cladding and roof) and a representative selection of the tenant units (approximately 10%).

## 2.0 METHODOLOGY

Pinchin conducted a room-by-room assessment (rooms, corridors, service areas, etc.) to identify the asbestos-containing building materials as defined in the scope.

The assessment was limited to non-intrusive testing. Concealed spaces such as those above solid ceilings and within shafts and pipe chases were accessed via existing access panels only. Demolition of walls, solid ceilings, structural items, interior finishes or exterior building finishes, to determine the presence of concealed materials was not conducted.

Demolition of masonry block walls (core holes) was not conducted to investigate for loose fill vermiculite insulation. Sampling of roofing materials was not conducted.

For further details on the methodology including test methods, refer to Appendix III.

## 3.0 BACKGROUND INFORMATION

### 3.1 Building Description

Description Item	Details
Use	Residential housing complex



Description Item	Details
Number of Floors	The building is two storeys plus one level below grade.
Total Area	The total area of the building is 190,406 square feet.
Year of Construction	The building was constructed in 1992.

### 3.2 Inaccessible Locations

The following rooms or areas were not accessible and are therefore not included in the report:

Area or Room	Reason
Pharmacy (Location 14)	Biological hazard

## 4.0 FINDINGS

The following section summarizes the findings of the assessment and provides a general description of the asbestos-containing materials (ACM) identified and their locations. For details on approximate quantities, condition, friability, accessibility and locations of asbestos materials; refer to the Asbestos Material Summary Report and All Data Report in Appendices V and VI.

### 4.1 Pipe Insulation

Pipes are insulated with fibreglass, or other non-asbestos insulation such as mineral fibre or elastomeric foam insulation.

Pipes insulated with asbestos-containing insulations may be present in inaccessible spaces such as above solid ceilings, in chases, in column enclosures and within shafts.

### 4.2 Duct Insulation and Mastic

Grey duct mastic present on seams / joints on ducts throughout the assessed area does not contain asbestos (samples S0010A-C, photo 1).

Ducts are either uninsulated or insulated with non-asbestos fibreglass (foil-faced or canvas).



Photo 1

### 4.3 Mechanical Equipment Insulation

Mechanical equipment is either uninsulated or insulated with non-asbestos fibreglass.

### 4.4 Acoustic Ceiling Tiles

Acoustic ceiling tiles are present in the assessed area, as follows:

Size, Type, Pattern	Sample Number or Date Code	Asbestos Type
24"x48", pinhole with fleck, photo 1	03/07/22	Non-asbestos
24"x48", pinhole with width wise fissure, photo 2	08/16/08	Non-asbestos
24"x48", gypsum tiles, photo 3	Not sampled	Non-asbestos
Mechanically fastened wood fibre	Not sampled	Non-asbestos

Ceiling tiles are presumed to be non-asbestos based on the date of manufacture determined from the date stamp applied to the top of the tiles. The tiles were manufactured after asbestos stopped being used in acoustic ceiling tiles.

All ceiling tiles are presumed to be non-asbestos based on the composition of the tiles (e.g. wood fibre, gypsum).



Photo 1



Photo 2



Photo 3

#### **4.5 Plaster and Stucco**

Plaster present on walls in the Corridor (Location 10) does not contain asbestos (samples S0015A-E).

#### **4.6 Drywall Joint Compound**

Drywall joint compound present on wall and ceiling finishes throughout the assessed area does not contain asbestos (samples S0009A-G, S0019A-C, S0020A-C, S0023A-C, S0026A-C, S0027A-C, S0028A-C, S0029A-C, S0030A-C, S0031A-C and S0032A-C).

#### **4.7 Vinyl Sheet Flooring**

Vinyl sheet flooring is present as follows:



**Asbestos Assessment**

Allendale , 185 Ontario Street South, Milton, ON, L9T 2M4  
Halton Region

September 25, 2023  
Pinchin File: 320580.001

Pattern, and Number	Colour Photo	Sample Locations	Sample Number	Asbestos Type	Asbestos Type (Adhesive)
Beige with sparkles, photo 1		Preparation Kitchen, Laundry Room / Office (Locations 8 and 15)	S0008A-C	None detected	None detected
Multi-colour wave pattern, photo 2		Storage (Location 21)	S0016A-C	None detected	N/A
Green wave pattern, photo 3		Storage (Location 22)	S0017A-C	None detected	None detected
Wood style, photo 4		Reception and Corridors, Cafeteria (Locations 26 and 27)	S0021A-C	None detected	None detected



Photo 1



Photo 2

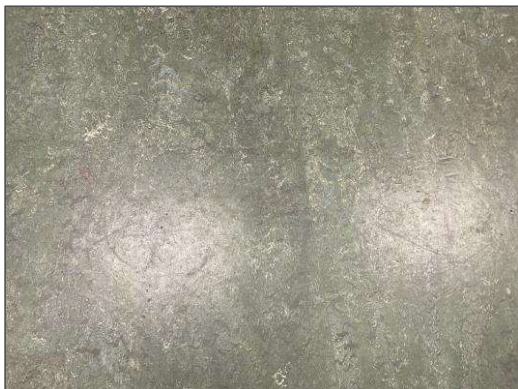


Photo 3



Photo 4

#### 4.8 Vinyl Floor Tiles, Baseboard, and Stair Flooring

Vinyl floor products are present as follows:

Size, Pattern, Colour	Sample Locations	Sample Number	Asbestos Type (tile)	Asbestos Type (mastic)
12"x12", light blue with white fleck, photo 1	Storage, Garage Bays and Corridor (Location 3, 4 and 10)	S0006A-C	None detected	None detected
12"x12", dark blue	Storage (Location 13)	S0007A-C	None detected	None detected
12"x12", beige peel and stick (3 layers)	Corridor (Location 10)	S0011A-C	None detected	N/A
12"x12", brown with light brown and white fleck, photo 2	Corridor (Location 10)	S0012A-C	None detected	None detected
12"x12" grey with brown and white fleck, photo 3	Corridor (Location 10)	S0013A-C	None detected	None detected
12"x12", blue with dark blue and white fleck	Corridor (Location 10)	S0014A-C	None detected	None detected
12"x12", white with black dots/splatter, photo 4	Bronte House (Location 29)	S0024A-C	None detected	None detected
12"x12", grey with beige streaks, photo 5	Stairwells (Location 36)	S0025A-C	None detected	None detected
12"x12", grey with dark grey and white fleck, photo 6	Bronte House and Trafalgar House (Location 29 and 32)	S0033A-C	None detected	None detected

Mastic was analysed for asbestos content where it was present on the tiles, however a comprehensive testing program for mastic was not performed.



Photo 1

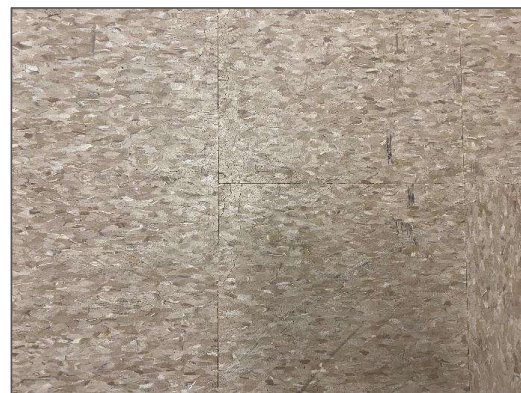


Photo 2

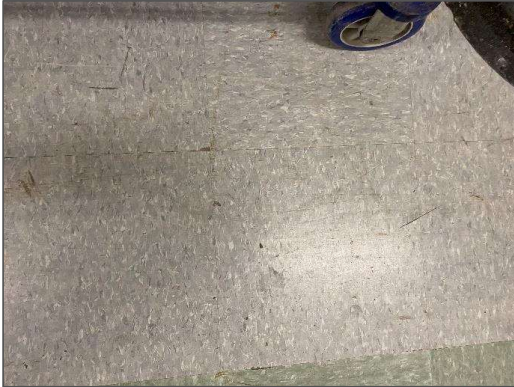


Photo 3



Photo 4

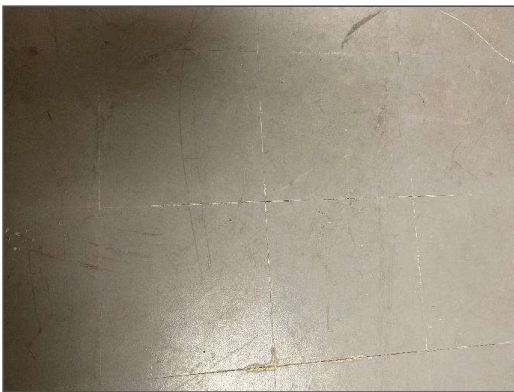


Photo 5



Photo 6

#### **4.9 Firestopping**

Red, maroon and blue/grey firestopping (sealant) present at pipe and conduit penetrations in the Generator / Electrical / Sprinkler / Workshop, Corridor, Storage and Garbage / Elevator Room (Locations 1, 2, 3 and 11) does not contain asbestos (samples S0002A-C, S0003A-C and S0004A-C, photo 1).

Firestopping (cementitious) is present at pipe and conduit penetrations in the Generator / Electrical / Sprinkler / Workshop (Location 1) does not contain asbestos (samples S0005A-C, photo 2).

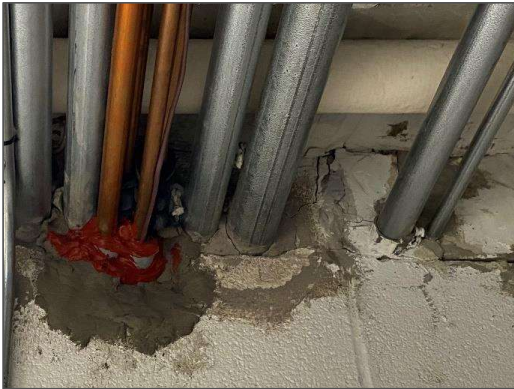


Photo 1

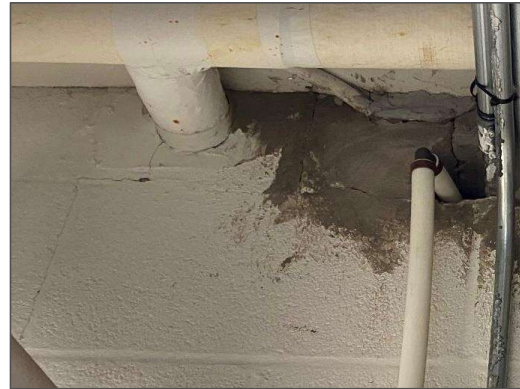


Photo 2

#### 4.10 Sealants, Caulking, and Putty

The following table presents a summary of caulking, sealants and putties present:

Material and Colour	Application	Sample Locations	Sample Number	Asbestos Type
Butyl sealant	Interior windows	Corridor (Location 10)	S0018A-C	Chrysotile

#### 4.11 Other Building Materials

The following is a summary of other materials sampled, for a complete list of locations, refer to Appendix V.

Description	Sample Location (Location #)	Sample Number	Asbestos
Paint on concrete block walls, photo 1	Generator / Electrical / Sprinkler / Workshop, Corridor, Corridor and Staff Washrooms and Changerooms (Location 1, 2, 10 and 19)	S0001A-G	No
Tectum wall covering, photo 2	Cafeteria and Auditorium (Location 27 and 28)	S0022A-C	No
Blue wave pattern epoxy, photo 3	Courtyard Vestibule (Location 33)	S0034A-C	No





Photo 1



Photo 2



Photo 3

#### **4.12 Excluded Asbestos Materials**

The following is a list of materials which may contain asbestos and was excluded from the assessment. These materials are presumed to contain asbestos until otherwise proven by sampling and analysis:

- Roofing felts and tar, mastics
- Ceramic tile setting compound
- Electrical components
- Vermiculite
- Adhesives and duct mastics
- Caulking and putties
- Paper products
- Soffit and fascia boards
- Fire resistant doors



- Vibration dampers on HVAC equipment
- Sealants on pipe threads

## **5.0 RECOMMENDATIONS**

### **5.1 General**

Perform a detailed intrusive assessment prior to building renovation or demolition operations. The assessment should include destructive testing (e.g., coring and/or removal of building finishes and components), and other hazardous materials (lead, mercury, PCBs, mould, etc.) and materials not tested in this study (e.g., roofing materials, caulking, mastics).

### **5.2 Remedial Work**

No remedial work is recommended.

### **5.3 On-going Management and Maintenance**

The following recommendations are made regarding on-going management and maintenance work involving the asbestos materials identified.

#### *5.3.1 Asbestos*

Prepare an Asbestos Management Program (AMP). The AMP should address and document, written work practices, worker training, notifications, policies, and responsibilities.

Perform a reassessment of asbestos materials on an annual basis.

Remove asbestos-containing materials (ACM) prior to alteration or maintenance work if ACM may be disturbed by the work. Follow appropriate asbestos precautions for the classification of work being performed.

Update the asbestos inventory upon completion of the abatement and removal of asbestos-containing materials and any other relevant findings.

## **6.0 TERMS AND LIMITATIONS**

This work was performed subject to the Terms and Limitations presented or referenced in the proposal for this project.

Information provided by Pinchin is intended for Client use only. Pinchin will not provide results or information to any party unless disclosure by Pinchin is required by law. Any use by a third party of reports or documents authored by Pinchin or any reliance by a third party on or decisions made by a third party based on the findings described in said documents, is the sole responsibility of such third parties.



Pinchin accepts no responsibility for damages suffered by any third party as a result of decisions made or actions conducted. No other warranties are implied or expressed.

## 7.0 REFERENCES

The following legislation and documents were referenced in completing the assessment and this report:

1. Asbestos on Construction Projects and in Buildings and Repair Operations, Ontario Regulation 278/05.
2. Designated Substances, Ontario Regulation 490/09.
3. Ministry of the Environment Regulation, R.R.O. 1990 Reg. 347 as amended.

\\pinchin.com\lham\Job\320000s\0320580.000 HALTON,Various2023Projects,HAZ,CONS\0320580.001  
HALTON,VariousSites&Facilities,HAZ,ASSMT\Deliverables\51\_Allendale LTC\Deliverables\320580.001 ACM Report 185 Ontario Street South Milton ON HALTON Sept 25  
2023.docx

Template: Master Report for Asbestos Assessment, HAZ, July 29, 2021

**APPENDIX I**  
**Drawings**

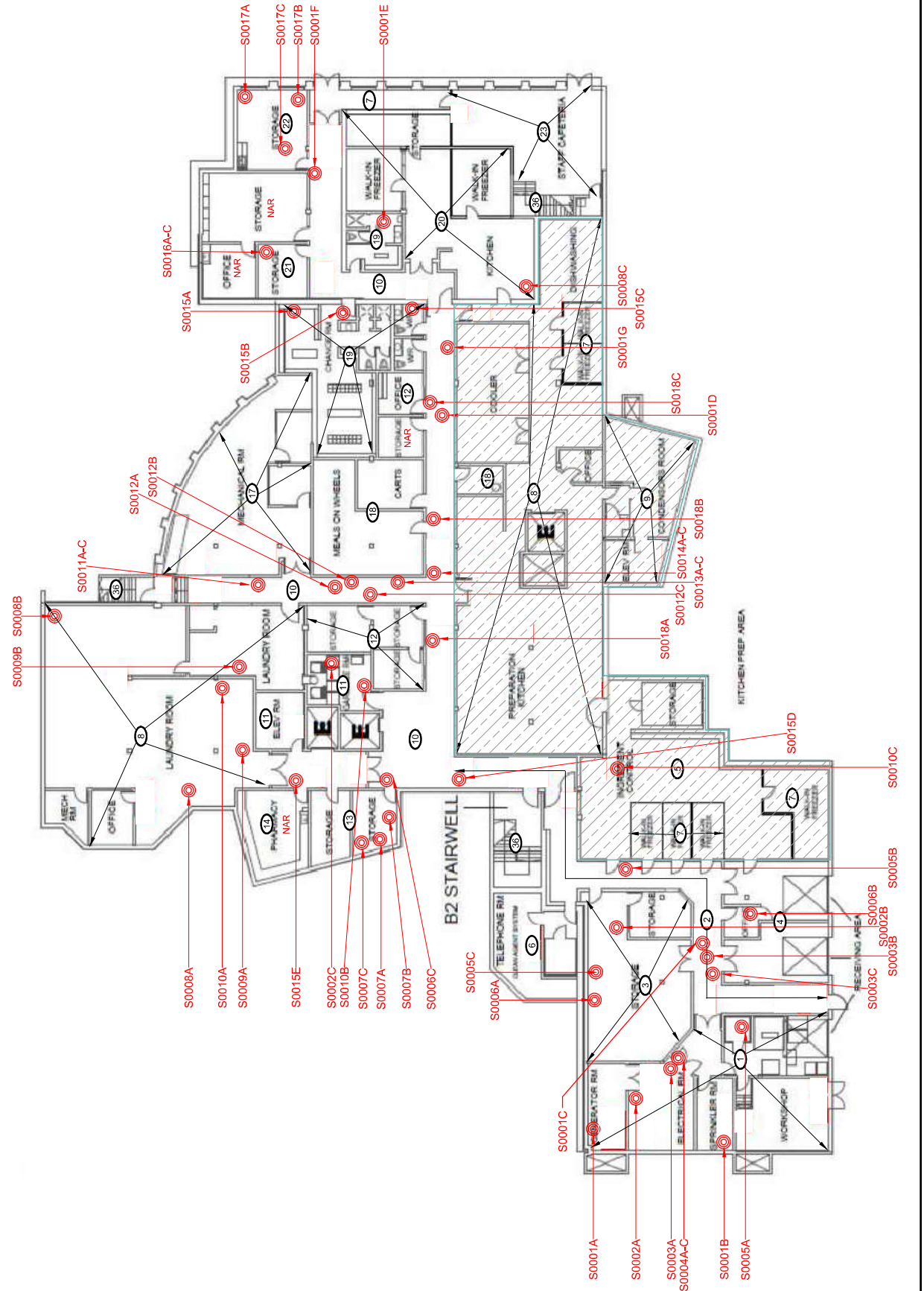


- LEGEND**
- PINCHIN LOCATION NUMBER
  - ASBESTOS BULK SAMPLE
  - NO ACCESS TO ROOM/AREA
  - UNDER CONSTRUCTION

NOT ALL KNOWN OR SUSPECTED ASBESTOS-CONTAINING BUILDING MATERIALS MAY BE DEPICTED ON THE MAP. THIS REPORT IS AN ASSESSMENT REPORT FOR A COMPLETE LIST OF KNOWN AND SUSPECTED ASBESTOS-CONTAINING BUILDING MATERIALS.  
 LEGEND IS COLOUR DEPENDENT. NON-COLOUR COPIES MAY ALTER INTERPRETATION.  
 BASE PLAN PROVIDED BY CLIENT.







PROJECT NAME	ASBESTOS ASSESSMENT
CLIENT NAME	THE REGIONAL MUNICIPALITY OF HALTON
PROJECT LOCATION	ALLENDALE LONG TERM CARE HOME 185 ONTARIO STREET SOUTH, MILTON, ONTARIO
FIGURE NAME	BASEMENT
PROJECT NUMBER	320580.001
SCALE	NOT TO SCALE
DRAWN BY	DS
REVIEWED BY	LH
DATE	SEPTEMBER 2023
FIGURE NUMBER	1 OF 3





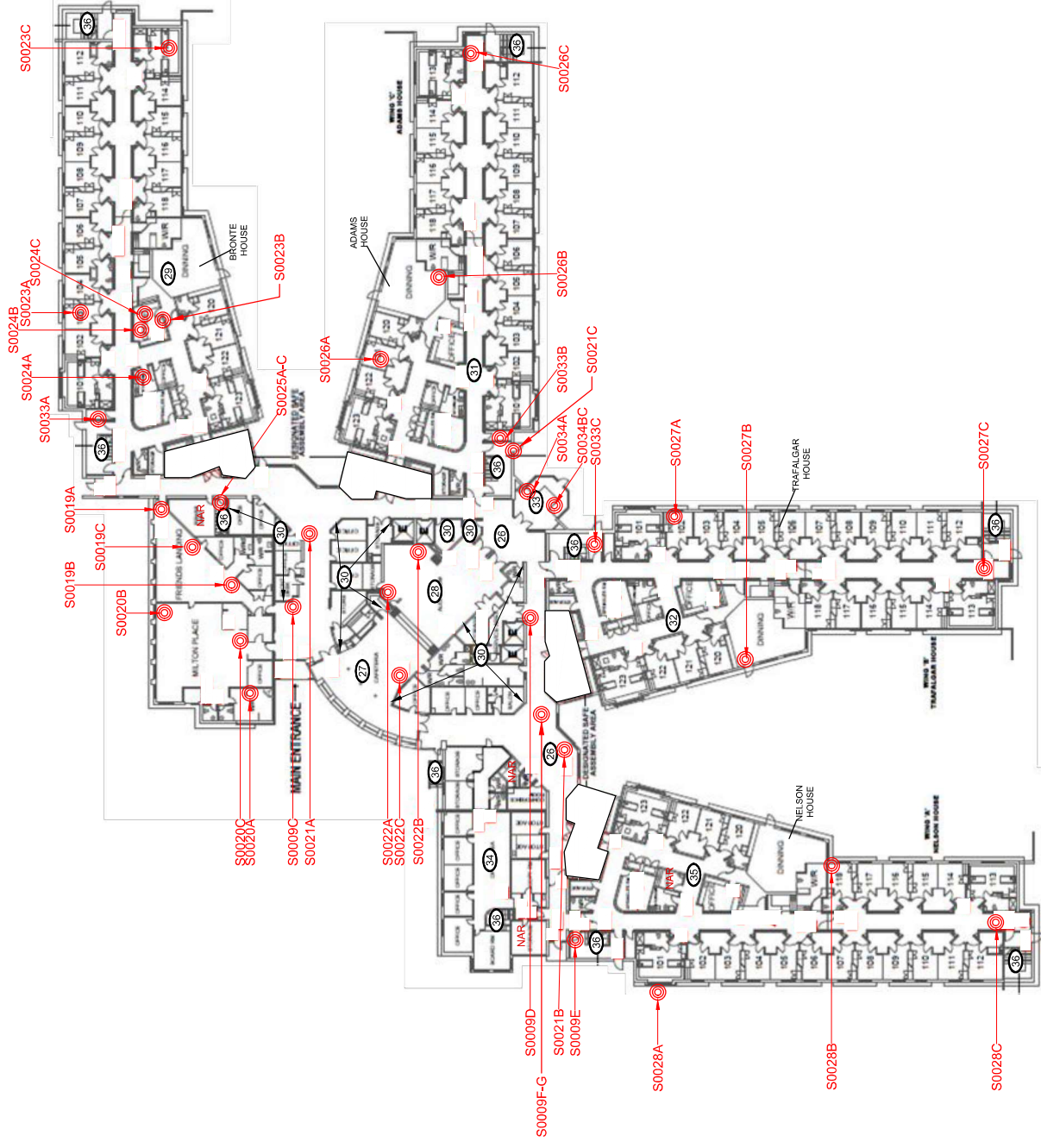
**LEGEND**

-  PINCHIN LOCATION NUMBER
-  ASBESTOS BULK SAMPLE
-  NO ACCESS TO ROOM/AREA
-  UNDER CONSTRUCTION

NOT ALL KNOWN OR SUSPECTED ASBESTOS-CONTAINING BUILDING MATERIALS MAY BE DEPICTED ON THE ASSESSMENT REPORT FOR A COMPLETE LIST OF KNOWN AND SUSPECTED ASBESTOS-CONTAINING BUILDING MATERIALS.  
LEGEND IS COLOUR DEPENDENT. NON-COLOUR COPIES MAY ALTER INTERPRETATION.  
BASE PLAN PROVIDED BY CLIENT.



PROJECT NAME	ASBESTOS ASSESSMENT
CLIENT NAME	THE REGIONAL MUNICIPALITY OF HALTON
PROJECT LOCATION	ALLENDALE LONG TERM CARE HOME 185 ONTARIO STREET SOUTH, MILTON, ONTARIO
FIGURE NAME	FIRST FLOOR
PROJECT NUMBER	320580.001
SCALE	NOT TO SCALE
DRAWN BY	DS
REVIEWED BY	LH
DATE	SEPTEMBER 2023
FIGURE NUMBER	2 OF 3



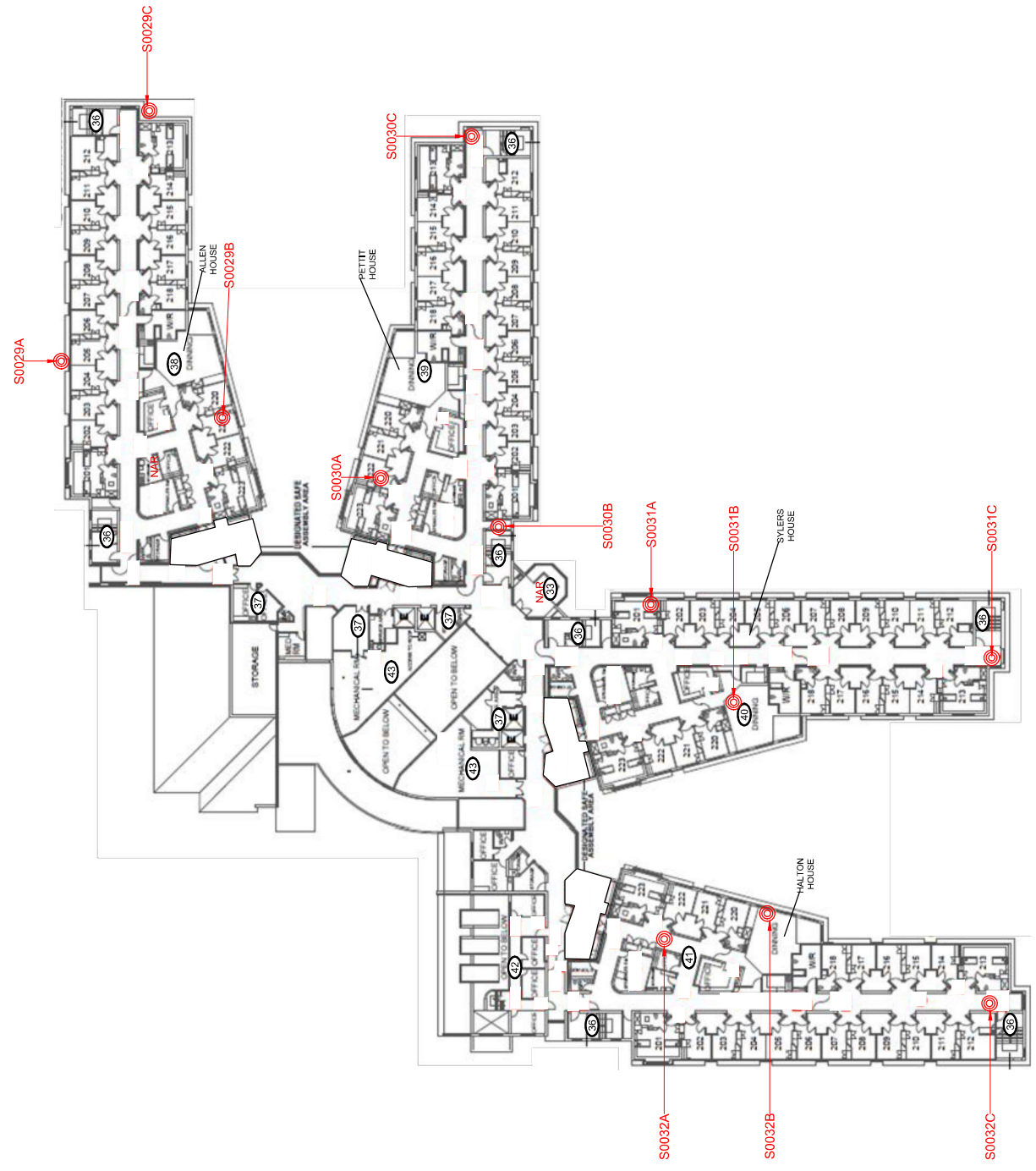


**LEGEND**  
○ PINCHIN LOCATION NUMBER  
● ASBESTOS BULK SAMPLE  
NAR NO ACCESS TO ROOM/AREA  
▨ UNDER CONSTRUCTION

NOT ALL KNOWN OR SUSPECTED ASBESTOS-CONTAINING BUILDING MATERIALS MAY BE DEPICTED ON THE FLOOR PLAN. FOR A COMPLETE ASSESSMENT REPORT FOR A COMPLETE LIST OF KNOWN AND SUSPECTED ASBESTOS-CONTAINING BUILDING MATERIALS, LEGEND IS COLOUR DEPENDENT. NON-COLOUR COPIES MAY ALTER INTERPRETATION.  
BASE PLAN PROVIDED BY CLIENT.



PROJECT NAME: ASBESTOS ASSESSMENT  
CLIENT NAME: THE REGIONAL MUNICIPALITY OF HALTON  
PROJECT LOCATION: ALLENDALE LONG TERM CARE HOME, 185 ONTARIO STREET SOUTH, MILTON, ONTARIO  
FIGURE NAME: SECOND FLOOR  
PROJECT NUMBER: 320580.001  
SCALE: NOT TO SCALE  
DRAWN BY: DS  
REVIEWED BY: LH  
DATE: SEPTEMBER 2023  
FIGURE NUMBER: 3 OF 3



**APPENDIX II**  
**Asbestos Analytical Certificates**





# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0001A	Wall,Paint,Concrete Block,Loc:1,Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	White, Gray Non-Fibrous Heterogeneous
10026314_0001					Crushed, Ashed
S0001B	Wall,Paint,Concrete Block,Loc:1,Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	White, Gray Non-Fibrous Heterogeneous
10026314_0002					Ashed, Crushed
S0001C	Wall,Paint,Concrete Block,Loc:2,Corridor	None Detected		100% Other	White, Gray Non-Fibrous Heterogeneous
10026314_0003					Ashed, Crushed
S0001D	Wall,Paint,Concrete Block,Loc:10,Corridor	None Detected		100% Other	White, Gray Non-Fibrous Heterogeneous
10026314_0004					Ashed, Crushed
S0001E	Wall,Paint,Concrete Block,Loc:19,Staff Washrooms And Changerooms	None Detected		100% Other	White, Gray Non-Fibrous Heterogeneous
10026314_0005					Crushed, Ashed
S0001F	Wall,Paint,Concrete Block,Loc:10,Corridor	None Detected		100% Other	White, Gray Non-Fibrous Heterogeneous
10026314_0006					Ashed, Crushed
S0001G	Wall,Paint,Concrete Block,Loc:10,Corridor	None Detected		100% Other	White, Gray Non-Fibrous Heterogeneous
10026314_0007					Crushed, Ashed
S0002A	Firestopping (mastic),Red,Loc:1,Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	Red Non-Fibrous Homogeneous
10026314_0008					Ashed

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Yanelis Delgado (157)

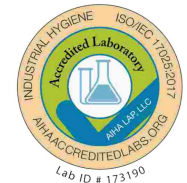
Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
 EPA Method: 600/R-93/116 and  
 40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
 151 York Boulevard Suite 200  
 Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
 Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0002B	Firestopping (mastic),Red,Loc:3,Storage	None Detected		100% Other	Red Non-Fibrous Homogeneous
10026314_0009					Ashed
S0002C	Firestopping (mastic),Red,Loc:11,Garbage / Elevator Room	None Detected		100% Other	Red Non-Fibrous Homogeneous
10026314_0010					Ashed
S0003A	Firestopping (mastic),Maroon,Loc:1,Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	Purple Non-Fibrous Homogeneous
10026314_0011					Ashed
S0003B	Firestopping (mastic),Maroon,Loc:2,Corridor	None Detected		100% Other	Purple Non-Fibrous Homogeneous
10026314_0012					Ashed
S0003C	Firestopping (mastic),Maroon,Loc:2,Corridor	None Detected		100% Other	Purple Non-Fibrous Homogeneous
10026314_0013					Ashed
S0004A	Firestopping (mastic),Blue/grey,Loc:1,Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0014					Ashed
S0004B	Firestopping (mastic),Blue/grey,Loc:1,Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0015					Ashed
S0004C	Firestopping (mastic),Blue/grey,Loc:1,Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0016					Ashed

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Yanelis Delgado (157)

Analyst

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# Bulk Asbestos Analysis

By Polarized Light Microscopy  
 EPA Method: 600/R-93/116 and  
 40 CFR, Part 763, Subpart E, App.E



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**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0005A	Firestopping (friable),Cementitious,Loc:1, Generator / Electrical / Sprinkler / Workshop	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0017					Crushed
S0005B	Firestopping (friable),Cementitious,Loc:2, Corridor	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0018					Crushed
S0005C	Firestopping (friable),Cementitious,Loc:3, Storage	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0019					Crushed
S0006A - A	Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:3,Storage	None Detected		100% Other	Blue Non-Fibrous Homogeneous
10026314_0020	tile				Dissolved
S0006A - B	Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:3,Storage	None Detected		100% Other	Black Non-Fibrous Homogeneous
10026314_0113	mastic				Dissolved
S0006B - A	Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:4,Garage Bays	None Detected		100% Other	Blue Non-Fibrous Homogeneous
10026314_0021	tile				Dissolved
S0006B - B	Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:4,Garage Bays	None Detected		100% Other	Black Non-Fibrous Homogeneous
10026314_0114	mastic				Dissolved
S0006C - A	Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:10,Corridor	None Detected		100% Other	Blue Non-Fibrous Homogeneous
10026314_0022	tile - ashed				Ashed

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Yanelis Delgado (157)

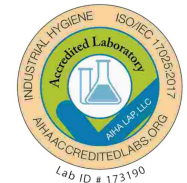
Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
 EPA Method: 600/R-93/116 and  
 40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
 151 York Boulevard Suite 200  
 Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
 Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0006C - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Light Blue With White Fleck, Loc: 10, Corridor	None Detected		100% Other	Black Non-Fibrous Homogeneous
10026314_0115	mastic				Dissolved
S0007A - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Dark Blue, Loc: 13, Storage	None Detected		100% Other	Blue Non-Fibrous Homogeneous
10026314_0023	tile				Dissolved
S0007A - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Dark Blue, Loc: 13, Storage	None Detected		100% Other	Black Non-Fibrous Homogeneous
10026314_0116	mastic				Dissolved
S0007B - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Dark Blue, Loc: 13, Storage	None Detected		100% Other	Blue Non-Fibrous Homogeneous
10026314_0024	tile				Dissolved
S0007B - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Dark Blue, Loc: 13, Storage	None Detected		100% Other	Black Non-Fibrous Homogeneous
10026314_0117	mastic				Dissolved
S0007C - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Dark Blue, Loc: 13, Storage	None Detected		100% Other	Blue Non-Fibrous Homogeneous
10026314_0025	tile - ashed				Ashed
S0007C - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Dark Blue, Loc: 13, Storage	None Detected		100% Other	Black Non-Fibrous Homogeneous
10026314_0118	mastic				Dissolved
S0008A - A	Floor, Vinyl Sheet Flooring, Blue With Sparkles, Loc: 15, Laundry Room / Office	None Detected	5% Fiber Glass	95% Other	Blue Non-Fibrous Homogeneous
10026314_0026	vinyl				Ashed

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Yanelis Delgado (157)

Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0008A - B	Floor,Vinyl Sheet Flooring,Blue With Sparkles,Loc:15,Laundry Room / Office	None Detected		100% Other	Tan, Black Non-Fibrous Heterogeneous
10026314_0119	mastic/compound				Crushed, Dissolved
S0008B - A	Floor,Vinyl Sheet Flooring,Blue With Sparkles,Loc:15,Laundry Room / Office	None Detected	5% Fiber Glass	95% Other	Blue Non-Fibrous Homogeneous
10026314_0027	vinyl				Ashed
S0008B - B	Floor,Vinyl Sheet Flooring,Blue With Sparkles,Loc:15,Laundry Room / Office	None Detected		100% Other	Tan, Black Non-Fibrous Heterogeneous
10026314_0120	mastic/compound				Dissolved, Crushed
S0008C - A	Floor,Vinyl Sheet Flooring,Beige With Sparkles,Loc:8,Preparation Kitchen	None Detected	5% Fiber Glass	95% Other	Blue Non-Fibrous Homogeneous
10026314_0028	vinyl				Ashed
S0008C - B	Floor,Vinyl Sheet Flooring,Beige With Sparkles,Loc:8,Preparation Kitchen	None Detected		100% Other	Black, Tan Non-Fibrous Heterogeneous
10026314_0121	mastic/compound				Crushed, Dissolved
S0009A	Wall,Drywall And Joint Compound,Loc:15,Laundry Room / Office	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0029					Crushed
S0009B	Wall,Drywall And Joint Compound,Loc:15,Laundry Room / Office	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0030					Crushed
S0009C	Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0031					Crushed

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Yanelis Delgado (157)

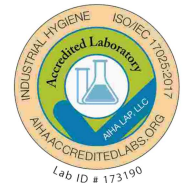
Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
 EPA Method: 600/R-93/116 and  
 40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
 151 York Boulevard Suite 200  
 Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
 Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0009D	Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0032					Crushed
S0009E	Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0033					Crushed
S0009F	Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0034					Crushed
S0009G	Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0035					Crushed
S0010A	Duct,Mastic, Grey,Loc:15,Laundry Room / Office	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0036					Ashed
S0010B	Duct,Mastic, Grey,Loc:11,Garbage / Elevator Room	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0037					Ashed
S0010C	Duct,Mastic, Grey,Loc:8,Preparation Kitchen	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0038					Ashed
S0011A - A	Floor,Vinyl Floor Tile And Mastic,Beige Peel And Stick,Loc:10,Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0039	self stick tile 1				Ashed

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Yanelis Delgado (157)

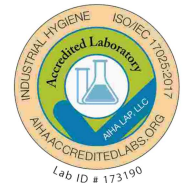
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# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0011A - B	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0122	self stick tile 2				Ashed
S0011A - C	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0123	self stick tile 3				Ashed
S0011B - A	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0040	self stick tile 1				Ashed
S0011B - B	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0124	self stick tile 2				Ashed
S0011B - C	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0125	self stick tile 3				Ashed
S0011C - A	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0041	self stick tile 1				Ashed
S0011C - B	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0126	self stick tile 2				Ashed
S0011C - C	Floor, Vinyl Floor Tile And Mastic, Beige Peel And Stick, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Heterogeneous
10026314_0127	self stick tile 3				Ashed

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Yanelis Delgado (157)

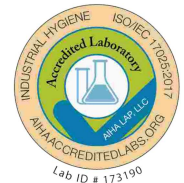
Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0012A	Floor, Vinyl Floor Tile And Mastic, 12x12 Brown With Light Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Tan Non-Fibrous Homogeneous
10026314_0042	tile only				Dissolved
S0012B	Floor, Vinyl Floor Tile And Mastic, 12x12 Brown With Light Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Tan Non-Fibrous Homogeneous
10026314_0043	tile only - ashed				Ashed
S0012C	Floor, Vinyl Floor Tile And Mastic, 12x12 Brown With Light Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Beige Non-Fibrous Homogeneous
10026314_0044	mastic only				Ashed
S0013A - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Cream Non-Fibrous Homogeneous
10026314_0045	tile				Dissolved
S0013A - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Black Non-Fibrous Heterogeneous
10026314_0128	mixed mastic				Dissolved
S0013B - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Cream Non-Fibrous Homogeneous
10026314_0046	tile				Dissolved
S0013B - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Black, Yellow Non-Fibrous Heterogeneous
10026314_0129	mixed mastic				Dissolved
S0013C - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Cream Non-Fibrous Homogeneous
10026314_0047	tile - ashed				Ashed

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Yanelis Delgado (157)

Analyst

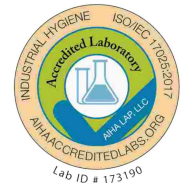
Approved Signatory





# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



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151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0013C - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Brown And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Black, Yellow Non-Fibrous Heterogeneous
10026314_0130	mixed mastic				Dissolved
S0014A - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Blue With Dark Blue And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0048	tile				Dissolved
S0014A - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Blue With Dark Blue And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Yellow, Black Non-Fibrous Heterogeneous
10026314_0131	mixed mastic				Dissolved
S0014B - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Blue With Dark Blue And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0049	tile				Dissolved
S0014B - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Blue With Dark Blue And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Black, Yellow Non-Fibrous Heterogeneous
10026314_0132	mixed mastic				Dissolved
S0014C - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Blue With Dark Blue And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0050	tile - ashed				Ashed
S0014C - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Blue With Dark Blue And White Fleck, Loc: 10, Corridor	None Detected		100% Other	Black, Yellow Non-Fibrous Heterogeneous
10026314_0133	mixed mastic				Dissolved
S0015A - A	Wall, Plaster, Loc: 10, Corridor	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0051	finish				Crushed

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Analyst

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EPA Method: 600/R-93/116 and  
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**Customer:** Pinchin Ltd.  
151 York Boulevard Suite 200  
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**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314

**Analysis:** PLM

**Date Received:** 06/23/2023

**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0015A - B	Wall,Plaster,Loc:10,Corridor	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0134	base - small sample				Crushed
S0015B - A	Wall,Plaster,Loc:10,Corridor	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0052	finish				Crushed
S0015B - B	Wall,Plaster,Loc:10,Corridor	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0135	base - small sample				Crushed
S0015C - A	Wall,Plaster,Loc:10,Corridor	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0053	finish				Crushed
S0015C - B	Wall,Plaster,Loc:10,Corridor	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0136	base				Crushed
S0015D	Wall,Plaster,Loc:10,Corridor	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0054	finish only - no base				Crushed
S0015E	Wall,Plaster,Loc:10,Corridor	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0055	finish only - no base				Crushed
S0016A	Floor,Vinyl Sheet Flooring,Multi Colour Wave Pattern,Loc:21,Storage	None Detected	15% Cellulose	85% Other	Gray Non-Fibrous Heterogeneous
10026314_0056	no mastic				Ashed

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Yanelis Delgado (157)

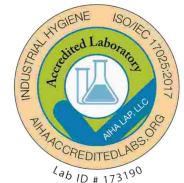
Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0016B	Floor, Vinyl Sheet Flooring, Multi Colour Wave Pattern, Loc:21, Storage	None Detected	15% Cellulose	85% Other	Gray Non-Fibrous Heterogeneous
10026314_0057	no mastic				Ashed
S0016C	Floor, Vinyl Sheet Flooring, Multi Colour Wave Pattern, Loc:21, Storage	None Detected	15% Cellulose	85% Other	Green Non-Fibrous Heterogeneous
10026314_0058	no mastic				Ashed
S0017A - A	Floor, Vinyl Sheet Flooring, Green Wave Pattern, Loc:22, Storage	None Detected	15% Cellulose	85% Other	Green Non-Fibrous Heterogeneous
10026314_0059	vinyl sheet flooring				Ashed
S0017A - B	Floor, Vinyl Sheet Flooring, Green Wave Pattern, Loc:22, Storage	None Detected		100% Other	Tan Non-Fibrous Homogeneous
10026314_0137	mastic				Dissolved
S0017B - A	Floor, Vinyl Sheet Flooring, Green Wave Pattern, Loc:22, Storage	None Detected	15% Cellulose	85% Other	Green Non-Fibrous Heterogeneous
10026314_0060	vinyl sheet flooring				Ashed
S0017B - B	Floor, Vinyl Sheet Flooring, Green Wave Pattern, Loc:22, Storage	None Detected		100% Other	Tan Non-Fibrous Homogeneous
10026314_0138	mastic				Dissolved
S0017C - A	Floor, Vinyl Sheet Flooring, Green Wave Pattern, Loc:22, Storage	None Detected	15% Cellulose	85% Other	Green Non-Fibrous Heterogeneous
10026314_0061	vinyl sheet flooring				Ashed
S0017C - B	Floor, Vinyl Sheet Flooring, Green Wave Pattern, Loc:22, Storage	None Detected		100% Other	Tan Non-Fibrous Homogeneous
10026314_0139	mastic				Dissolved

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Yanelis Delgado (157)

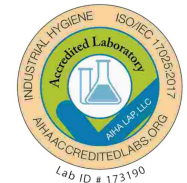
Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
 EPA Method: 600/R-93/116 and  
 40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
 151 York Boulevard Suite 200  
 Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
 Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0018A	Caulking,Butyl,Loc:10,Corridor	4% Chrysotile		96% Other	Black Non-Fibrous Homogeneous
10026314_0062					Ashed
S0018B	Caulking,Butyl,Loc:10,Corridor	4% Chrysotile		96% Other	Black Non-Fibrous Homogeneous
10026314_0063					Ashed
S0018C	Caulking,Butyl,Loc:10,Corridor	4% Chrysotile		96% Other	Black Non-Fibrous Homogeneous
10026314_0064					Ashed
S0019A	Wall,Drywall And Joint Compound,Loc:25,Friends Landing	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0065					Crushed
S0019B	Wall,Drywall And Joint Compound,Loc:25,Friends Landing	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0066					Crushed
S0019C	Wall,Drywall And Joint Compound,Loc:25,Friends Landing	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0067					Crushed
S0020A	Wall,Drywall And Joint Compound,Loc:24,Milton Place	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0068					Crushed
S0020B	Wall,Drywall And Joint Compound,Loc:24,Milton Place	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0069					Crushed

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Lab Sample ID	Lab Notes				Treatment
S0020C	Wall,Drywall And Joint Compound,Loc:24,Milton Place	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0070					Crushed
S0021A - A	Floor,Vinyl Sheet Flooring,Wood Style,Loc:26,Reception And Corridors	None Detected	5% Fiber Glass	95% Other	Tan Non-Fibrous Homogeneous
10026314_0071	vinyl				Ashed
S0021A - B	Floor,Vinyl Sheet Flooring,Wood Style,Loc:26,Reception And Corridors	None Detected		100% Other	Transparent Non-Fibrous Homogeneous
10026314_0140	adhesive				Dissolved
S0021B - A	Floor,Vinyl Sheet Flooring,Wood Style,Loc:26,Reception And Corridors	None Detected	5% Fiber Glass	95% Other	Tan Non-Fibrous Homogeneous
10026314_0072	vinyl				Ashed
S0021B - B	Floor,Vinyl Sheet Flooring,Wood Style,Loc:26,Reception And Corridors	None Detected		100% Other	Transparent Non-Fibrous Homogeneous
10026314_0141	adhesive				Dissolved
S0021C - A	Floor,Vinyl Sheet Flooring,Wood Style,Loc:27,Cafeteria	None Detected	5% Fiber Glass	95% Other	Tan Non-Fibrous Homogeneous
10026314_0073	vinyl				Ashed
S0021C - B	Floor,Vinyl Sheet Flooring,Wood Style,Loc:27,Cafeteria	None Detected		100% Other	Transparent Non-Fibrous Homogeneous
10026314_0142	adhesive				Dissolved
S0022A	Wall,Wall Covering,Tectum,Loc:28,Auditorium	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0074					Crushed

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Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0022B	Wall, Wall Covering, Tectum, Loc:28, Auditorium	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0075					Crushed
S0022C	Wall, Wall Covering, Tectum, Loc:27, Cafeteria	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0076					Crushed
S0023A	Wall, Drywall And Joint Compound, Loc:29, Bronte House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0077					Crushed
S0023B	Wall, Drywall And Joint Compound, Loc:29, Bronte House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0078					Crushed
S0023C	Wall, Drywall And Joint Compound, Loc:29, Bronte House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0079					Crushed
S0024A - A	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0080	tile				Dissolved
S0024A - B	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Yellow Non-Fibrous Homogeneous
10026314_0143	mastic				Dissolved
S0024A - C	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0144	leveling compound				Crushed

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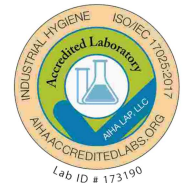
Analyst

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# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



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151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
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**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0024B - A	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0081	tile				Dissolved
S0024B - B	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Yellow Non-Fibrous Homogeneous
10026314_0145	mastic				Dissolved
S0024B - C	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0146	leveling compound				Crushed
S0024C - A	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0082	tile - ashed				Ashed
S0024C - B	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Yellow Non-Fibrous Homogeneous
10026314_0147	mastic				Dissolved
S0024C - C	Floor, Vinyl Floor Tile And Mastic, 12x12 White Black Dots/splatter, Loc:29, Bronte House	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0148	leveling compound				Crushed
S0025A - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0083	vinyl				Ashed
S0025A - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Cream Non-Fibrous Homogeneous
10026314_0149	mastic				Dissolved

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Yanelis Delgado (157)

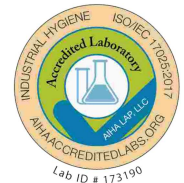
Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
 EPA Method: 600/R-93/116 and  
 40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
 151 York Boulevard Suite 200  
 Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
 Leslie Heywood

**Lab Order ID:** 10026314  
**Analysis:** PLM  
**Date Received:** 06/23/2023  
**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0025A - C	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0150	leveling compound				Crushed
S0025B - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0084	vinyl				Ashed
S0025B - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Cream Non-Fibrous Homogeneous
10026314_0151	mastic				Dissolved
S0025B - C	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0152	leveling compound				Crushed
S0025C - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0085	vinyl				Ashed
S0025C - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Cream Non-Fibrous Homogeneous
10026314_0153	mastic				Dissolved
S0025C - C	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Beige Streaks, Loc:36, Stairwells	None Detected		100% Other	Gray Non-Fibrous Heterogeneous
10026314_0154	leveling compound				Crushed
S0026A	Wall, Drywall And Joint Compound, Loc:31, Adam's House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0086					Crushed

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Yanelis Delgado (157)

Analyst

Approved Signatory





# Bulk Asbestos Analysis

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EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



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**Analysis:** PLM  
**Date Received:** 06/23/2023  
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**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0026B	Wall,Drywall And Joint Compound,Loc:31,Adam's House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0087					Crushed
S0026C	Wall,Drywall And Joint Compound,Loc:31,Adam's House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0088					Crushed
S0027A	Wall,Drywall And Joint Compound,Loc:32,Trafalgar House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0089					Crushed
S0027B	Wall,Drywall And Joint Compound,Loc:32,Trafalgar House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0090					Crushed
S0027C	Wall,Drywall And Joint Compound,Loc:32,Trafalgar House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0091					Crushed
S0028A	Wall,Drywall And Joint Compound,Loc:35,Nelson House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0092					Crushed
S0028B	Wall,Drywall And Joint Compound,Loc:35,Nelson House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0093					Crushed
S0028C	Wall,Drywall And Joint Compound,Loc:35,Nelson House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0094					Crushed

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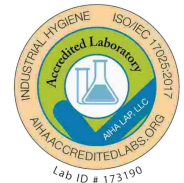
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Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0029A	Wall,Drywall And Joint Compound,Loc:38,Allen House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0095					Crushed
S0029B	Wall,Drywall And Joint Compound,Loc:38,Allen House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0096					Crushed
S0029C	Wall,Drywall And Joint Compound,Loc:38,Allen House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0097					Crushed
S0030A	Wall,Drywall And Joint Compound,Loc:39,Pettithouse	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0098					Crushed
S0030B	Wall,Drywall And Joint Compound,Loc:39,Pettithouse	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0099					Crushed
S0030C	Wall,Drywall And Joint Compound,Loc:39,Pettithouse	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0100					Crushed
S0031A	Wall,Drywall And Joint Compound,Loc:40,Sykes House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0101					Crushed
S0031B	Wall,Drywall And Joint Compound,Loc:40,Sykes House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0102					Crushed

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Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0031C	Wall,Drywall And Joint Compound,Loc:40,Sykes House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0103					Crushed
S0032A	Wall,Drywall And Joint Compound,Loc:41,Halton House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0104					Crushed
S0032B	Wall,Drywall And Joint Compound,Loc:41,Halton House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0105					Crushed
S0032C	Wall,Drywall And Joint Compound,Loc:41,Halton House	None Detected		100% Other	White Non-Fibrous Homogeneous
10026314_0106					Crushed
S0033A - A	Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Dark Grey And White Fleck,Loc:29,Bronte House	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0107	tile				Dissolved
S0033A - B	Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Dark Grey And White Fleck,Loc:29,Bronte House	None Detected		100% Other	Gray, Black Non-Fibrous Heterogeneous
10026314_0155	mastic/leveling compound				Crushed, Dissolved
S0033B - A	Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Dark Grey And White Fleck,Loc:31,Adam's House	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0108	tile				Dissolved
S0033B - B	Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Dark Grey And White Fleck,Loc:31,Adam's House	None Detected		100% Other	Gray, Black Non-Fibrous Heterogeneous
10026314_0156	mastic/leveling compound				Dissolved, Crushed

Disclaimer: Due to the nature of the EPA 600 method, asbestos may not be detected in samples containing low levels of asbestos. We strongly recommend that analysis of floor tiles, vermiculite, and/or heterogeneous soil samples be conducted by TEM for confirmation of "None Detected" by PLM. This report relates only to the samples tested and may not be reproduced, except in full, without the written approval of SAI. This report may not be used by the client to claim product endorsement by NVLAP or any other agency of the U.S. government. Analytical uncertainty available upon request. Scientific Analytical Institute participates in the NVLAP Proficiency Testing program. Unless otherwise noted blank sample correction was not performed. Estimated MDL is 0.1%.

Yanelis Delgado (157)

Analyst

Approved Signatory



# Bulk Asbestos Analysis

By Polarized Light Microscopy  
EPA Method: 600/R-93/116 and  
40 CFR, Part 763, Subpart E, App.E



**Customer:** Pinchin Ltd.  
151 York Boulevard Suite 200  
Hamilton, ON L8R 3M2

**Attn:** Justin Appleby  
Leslie Heywood

**Lab Order ID:** 10026314

**Analysis:** PLM

**Date Received:** 06/23/2023

**Date Reported:** 07/03/2023

**Project:** Halton Building 51 Allendale

Sample ID	Description	Asbestos	Fibrous Components	Non-Fibrous Components	Attributes
Lab Sample ID	Lab Notes				Treatment
S0033C - A	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Dark Grey And White Fleck, Loc:32, Trafalgar House	None Detected		100% Other	Gray Non-Fibrous Homogeneous
10026314_0109	tile - ashed				Ashed
S0033C - B	Floor, Vinyl Floor Tile And Mastic, 12x12 Grey With Dark Grey And White Fleck, Loc:32, Trafalgar House	None Detected		100% Other	Black, Gray Non-Fibrous Heterogeneous
10026314_0157	mastic/leveling compound				Crushed, Dissolved
S0034A	Floor, Epoxy, Blue Wave Pattern, Loc:33, Courtyard Vestibule	None Detected	5% Cellulose	95% Other	Gray Non-Fibrous Homogeneous
10026314_0110					Dissolved
S0034B	Floor, Epoxy, Blue Wave Pattern, Loc:33, Courtyard Vestibule	None Detected	5% Cellulose	95% Other	Gray Non-Fibrous Homogeneous
10026314_0111					Dissolved
S0034C	Floor, Epoxy, Blue Wave Pattern, Loc:33, Courtyard Vestibule	None Detected	5% Cellulose	95% Other	Gray Non-Fibrous Homogeneous
10026314_0112					Dissolved

Disclaimer: Due to the nature of the EPA 600 method, asbestos may not be detected in samples containing low levels of asbestos. We strongly recommend that analysis of floor tiles, vermiculite, and/or heterogenous soil samples be conducted by TEM for confirmation of "None Detected" by PLM. This report relates only to the samples tested and may not be reproduced, except in full, without the written approval of SAI. This report may not be used by the client to claim product endorsement by NVLAP or any other agency of the U.S. government. Analytical uncertainty available upon request. Scientific Analytical Institute participates in the NVLAP Proficiency Testing program. Unless otherwise noted blank sample correction was not performed. Estimated MDL is 0.1%.


Yanelis Delgado (157)

Analyst

Approved Signatory

10024314

Version 1-15-2012

<b>Client:</b> Pinchin Ltd. <b>Contact:</b> Justin Appleby / Leslie Heywood <b>Address:</b> ON <b>Phone:</b> <b>Fax:</b> <b>Email:</b> jappleby@pinchin.com lheywood@pinchin.com	<b>Project:</b> Halton Building 51 Allendale No Stop Positives. Perform ashing on third vinyl floor tile if first two are ND.	<b>Client Notes:</b>	<b>P.O. #:</b> 320580.001 <b>Date Submitted:</b> 06-16-2023 <b>Analysis:</b> PLM BULK EPA 600 <b>TurnAroundTime:</b> 6+ days	<b>Instructions:</b> Use Column "B" for your contact info  To See an Example Click the bottom Example Tab.  112 <b>Begin Samples with a "&lt;&lt;" above the first sample</b>  <b>and end with a "&gt;&gt;" below the last sample.</b> Only Enter your data on the first sheet "Sheet1"  Note: Data 1 and Data 2 are optional fields that do not show up on the official report, however they will be included in the electronic data returned to you to facilitate your reintegration of the report data.	<b>Scientific Analytical Institute</b>  <b>4604 Dundas Dr.</b> <b>Greensboro, NC 27407</b> <b>Phone: 336.292.3888</b> <b>Fax: 336.292.3313</b> <b>Email: lab@sailab.com</b>
--	--	----------------------	---	---	--

Sample Number	Data 1 (Lab use only)	Sample Description	Data 2 (Lab use only)
<<			
S0001A		Wall,Paint,Concrete Block,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0001B		Wall,Paint,Concrete Block,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0001C		Wall,Paint,Concrete Block,Loc:2,Corridor	
S0001D		Wall,Paint,Concrete Block,Loc:10,Corridor	
S0001E		Wall,Paint,Concrete Block,Loc:19,Staff Washrooms And Changerooms	
S0001F		Wall,Paint,Concrete Block,Loc:10,Corridor	
S0001G		Wall,Paint,Concrete Block,Loc:10,Corridor	
S0002A		Firestopping (mastic),Red,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0002B		Firestopping (mastic),Red,Loc:3,Storage	
S0002C		Firestopping (mastic),Red,Loc:11,Garbage / Elevator Room	
S0003A		Firestopping (mastic),Maroon,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0003B		Firestopping (mastic),Maroon,Loc:2,Corridor	
S0003C		Firestopping (mastic),Maroon,Loc:2,Corridor	
S0004A		Firestopping (mastic),Blue/grey,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0004B		Firestopping (mastic),Blue/grey,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0004C		Firestopping (mastic),Blue/grey,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0005A		Firestopping (friable),Cementitious,Loc:1,Generator / Electrical / Sprinkler / Workshop	
S0005B		Firestopping (friable),Cementitious,Loc:2,Corridor	
S0005C		Firestopping (friable),Cementitious,Loc:3,Storage	
S0006A		Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:3,Storage	
S0006B		Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:4,Garage Bays	
S0006C		Floor,Vinyl Floor Tile And Mastic,12x12 Light Blue With White Fleck,Loc:10,Corridor	
S0007A		Floor,Vinyl Floor Tile And Mastic,12x12 Dark Blue,Loc:13,Storage	
S0007B		Floor,Vinyl Floor Tile And Mastic,12x12 Dark Blue,Loc:13,Storage	
S0007C		Floor,Vinyl Floor Tile And Mastic,12x12 Dark Blue,Loc:13,Storage	
S0008A		Floor,Vinyl Sheet Flooring,Blue With Sparkles,Loc:15,Laundry Room / Office	
S0008B		Floor,Vinyl Sheet Flooring,Blue With Sparkles,Loc:15,Laundry Room / Office	
S0008C		Floor,Vinyl Sheet Flooring,Beige With Sparkles,Loc:8,Preparation Kitchen	
S0009A		Wall,Drywall And Joint Compound,Loc:15,Laundry Room / Office	
S0009B		Wall,Drywall And Joint Compound,Loc:15,Laundry Room / Office	
S0009C		Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	
S0009D		Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	
S0009E		Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	
S0009F		Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	
S0009G		Wall,Drywall And Joint Compound,Loc:26,Reception And Corridors	
S0010A		Duct,Mastic, Grey,Loc:15,Laundry Room / Office	
S0010B		Duct,Mastic, Grey,Loc:11,Garbage / Elevator Room	
S0010C		Duct,Mastic, Grey,Loc:8,Preparation Kitchen	
S0011A		Floor,Vinyl Floor Tile And Mastic,Beige Peel And Stick,Loc:10,Corridor	
S0011B		Floor,Vinyl Floor Tile And Mastic,Beige Peel And Stick,Loc:10,Corridor	
S0011C		Floor,Vinyl Floor Tile And Mastic,Beige Peel And Stick,Loc:10,Corridor	
S0012A		Floor,Vinyl Floor Tile And Mastic,12x12 Brown With Light Brown And White Fleck,Loc:10,Corridor	
S0012B		Floor,Vinyl Floor Tile And Mastic,12x12 Brown With Light Brown And White Fleck,Loc:10,Corridor	
S0012C		Floor,Vinyl Floor Tile And Mastic,12x12 Brown With Light Brown And White Fleck,Loc:10,Corridor	
S0013A		Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Brown And White Fleck,Loc:10,Corridor	
S0013B		Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Brown And White Fleck,Loc:10,Corridor	
S0013C		Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Brown And White Fleck,Loc:10,Corridor	
S0014A		Floor,Vinyl Floor Tile And Mastic,12x12 Blue With Dark Blue And White Fleck,Loc:10,Corridor	
S0014B		Floor,Vinyl Floor Tile And Mastic,12x12 Blue With Dark Blue And White Fleck,Loc:10,Corridor	
S0014C		Floor,Vinyl Floor Tile And Mastic,12x12 Blue With Dark Blue And White Fleck,Loc:10,Corridor	
S0015A		Wall,Plaster,Loc:10,Corridor	
S0015B		Wall,Plaster,Loc:10,Corridor	

Accepted

Rejected

B. Bullen  
6/23 1030A

S0015:C Wall,Plaster,Loc:10,Corridor  
 S0015:D Wall,Plaster,Loc:10,Corridor  
 S0015:E Wall,Plaster,Loc:10,Corridor  
 S0016:A Floor,Vinyl Sheet Flooring,Multi Colour Wave Pattern,Loc:21,Storage  
 S0016:B Floor,Vinyl Sheet Flooring,Multi Colour Wave Pattern,Loc:21,Storage  
 S0016:C Floor,Vinyl Sheet Flooring,Multi Colour Wave Pattern,Loc:21,Storage  
 S0017:A Floor,Vinyl Sheet Flooring,Green Wave Pattern,Loc:22,Storage  
 S0017:B Floor,Vinyl Sheet Flooring,Green Wave Pattern,Loc:22,Storage  
 S0017:C Floor,Vinyl Sheet Flooring,Green Wave Pattern,Loc:22,Storage  
 S0018:A Caulking,Butyl,Loc:10,Corridor  
 S0018:B Caulking,Butyl,Loc:10,Corridor  
 S0018:C Caulking,Butyl,Loc:10,Corridor  
 S0019:A Wall,Drywall And Joint Compound,Loc:25,Friends Landing  
 S0019:B Wall,Drywall And Joint Compound,Loc:25,Friends Landing  
 S0019:C Wall,Drywall And Joint Compound,Loc:25,Friends Landing  
 S0020:A Wall,Drywall And Joint Compound,Loc:24,Milton Place  
 S0020:B Wall,Drywall And Joint Compound,Loc:24,Milton Place  
 S0020:C Wall,Drywall And Joint Compound,Loc:24,Milton Place  
 S0021:A Floor,Vinyl Sheet Flooring,Wood Style,Loc:26,Reception And Corridors  
 S0021:B Floor,Vinyl Sheet Flooring,Wood Style,Loc:26,Reception And Corridors  
 S0021:C Floor,Vinyl Sheet Flooring,Wood Style,Loc:27,Cafeteria  
 S0022:A Wall,Wall Covering,Tectum,Loc:28,Auditorium  
 S0022:B Wall,Wall Covering,Tectum,Loc:28,Auditorium  
 S0022:C Wall,Wall Covering,Tectum,Loc:27,Cafeteria  
 S0023:A Wall,Drywall And Joint Compound,Loc:29,Bronte House  
 S0023:B Wall,Drywall And Joint Compound,Loc:29,Bronte House  
 S0023:C Wall,Drywall And Joint Compound,Loc:29,Bronte House  
 S0024:A Floor,Vinyl Floor Tile And Mastic,12x12 White Black Dots/splatter,Loc:29,Bronte House  
 S0024:B Floor,Vinyl Floor Tile And Mastic,12x12 White Black Dots/splatter,Loc:29,Bronte House  
 S0024:C Floor,Vinyl Floor Tile And Mastic,12x12 White Black Dots/splatter,Loc:29,Bronte House  
 S0025:A Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Beige Streaks,Loc:36,Stairwells  
 S0025:B Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Beige Streaks,Loc:36,Stairwells  
 S0025:C Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Beige Streaks,Loc:36,Stairwells  
 S0026:A Wall,Drywall And Joint Compound,Loc:31,Adam's House  
 S0026:B Wall,Drywall And Joint Compound,Loc:31,Adam's House  
 S0026:C Wall,Drywall And Joint Compound,Loc:31,Adam's House  
 S0027:A Wall,Drywall And Joint Compound,Loc:32,Trafalgar House  
 S0027:B Wall,Drywall And Joint Compound,Loc:32,Trafalgar House  
 S0027:C Wall,Drywall And Joint Compound,Loc:32,Trafalgar House  
 S0028:A Wall,Drywall And Joint Compound,Loc:35,Nelson House  
 S0028:B Wall,Drywall And Joint Compound,Loc:35,Nelson House  
 S0028:C Wall,Drywall And Joint Compound,Loc:35,Nelson House  
 S0029:A Wall,Drywall And Joint Compound,Loc:38,Allen House  
 S0029:B Wall,Drywall And Joint Compound,Loc:38,Allen House  
 S0029:C Wall,Drywall And Joint Compound,Loc:38,Allen House  
 S0030:A Wall,Drywall And Joint Compound,Loc:39,Pettithouse  
 S0030:B Wall,Drywall And Joint Compound,Loc:39,Pettithouse  
 S0030:C Wall,Drywall And Joint Compound,Loc:39,Pettithouse  
 S0031:A Wall,Drywall And Joint Compound,Loc:40,Sykes House  
 S0031:B Wall,Drywall And Joint Compound,Loc:40,Sykes House  
 S0031:C Wall,Drywall And Joint Compound,Loc:40,Sykes House  
 S0032:A Wall,Drywall And Joint Compound,Loc:41,Halton House  
 S0032:B Wall,Drywall And Joint Compound,Loc:41,Halton House  
 S0032:C Wall,Drywall And Joint Compound,Loc:41,Halton House  
 S0033:A Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Dark Grey And White Fleck,Loc:29,Bronte House  
 S0033:B Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Dark Grey And White Fleck,Loc:31,Adam's House  
 S0033:C Floor,Vinyl Floor Tile And Mastic,12x12 Grey With Dark Grey And White Fleck,Loc:32,Trafalgar House  
 S0034A Floor,Epoxy,Blue Wave Pattern,Loc:33,Courtyard Vestibule  
 S0034B Floor,Epoxy,Blue Wave Pattern,Loc:33,Courtyard Vestibule  
 S0034C Floor,Epoxy,Blue Wave Pattern,Loc:33,Courtyard Vestibule  
 >>

**APPENDIX III**  
**Methodology**



## 1.0 GENERAL

An inspection was conducted to identify the asbestos-containing materials (ACM) incorporated in the structure and its finishes as defined by the scope of work.

Information regarding the location and condition of ACM encountered and visually estimated quantities were recorded. The locations of any samples collected were recorded on small-scale plans. As-built drawings and previous reports were referenced where provided.

Sample collection was conducted in accordance with our Standard Operating Procedures.

The inspection for asbestos included friable and non-friable asbestos-containing materials (ACM). A friable material is a material that when dry can be crumbled, pulverized or powdered by hand pressure.

A separate set of samples was collected of each type of homogenous material suspected to contain asbestos. A homogenous material is defined by the US EPA as material that is uniform in texture and appearance, was installed at one time, and is unlikely to consist of more than one type or formulation of material. The homogeneous materials were determined by visual examination and available information on the phases of construction and prior renovations.

Samples were collected at a rate that is in compliance with the requirements of local regulations and guidelines. In some cases, manufactured products such as asbestos cement pipe were visually identified without sample confirmation.

The analysis was performed in accordance with Test Method EPA/600/R-93/116: Method for the Determination of Asbestos in Bulk Building Materials, July 1993.

Analytical results were compared to the following criteria.

Jurisdiction*	Friable	Non-Friable
Ontario	0.5%	0.5%

Where building materials are described in the report as “non-asbestos” or “does not contain asbestos”, this means that either no asbestos was detected by the analytical method utilized in any of the multiple samples or, if detected, it is below the lower limit of an asbestos-containing material in the applicable regulation. Additionally, these terms are used for materials which historically are known to not include asbestos in their manufacturing.

Asbestos materials were evaluated in order to make recommendations regarding remedial work. The priority for remedial action was based on several factors:

- Friability (friable or non-friable);





- Condition (good, fair, poor, debris);
- Accessibility (ranking from accessible to all building users to inaccessible);
- Visibility (whether the material is obscured by other building components).
- Efficiency of the work (for example, if damaged ACM is being removed in an area, it may be most practical to remove all ACM in the area even if it is in good condition).

For a complete description of the Evaluation Criteria and Basis of Recommendations, refer to Annex A.

Template: Methodology for Asbestos Assessment, HAZ, July 22, 2021

## **METHODOLOGY ANNEX A EVALUATION CRITERIA**

## 1.0 EVALUATION CRITERIA AND BASIS OF RECOMMENDATIONS

The detailed asbestos assessment provides information regarding the location, condition, accessibility and friability of the asbestos-containing materials (ACM). In order to make recommendations for compliance with current regulations, Pinchin developed the following criteria.

## 2.0 EVALUATION OF CONDITION

### 2.1 Friable Sprayed or Trowelled Fireproofing, Thermal Insulation and Texture Finishes (Surfacing Materials)

To evaluate the condition of ACM sprayed or trowelled on fireproofing, sprayed or trowelled thermal insulation (non-mechanical), or texture, decorative or acoustic finishes, the following criteria are applied:

<b>Good</b>	Surface of material shows no significant signs of damage, deterioration or delamination. Good condition includes unencapsulated or unpainted fireproofing or texture finishes, where no or limited delamination or damage is observed, or encapsulated fireproofing or texture finishes where the encapsulant or paint has been applied after the damage or fallout occurred.
<b>Poor</b>	A sprayed material that shows signs of significant damage or is significantly delaminating or deteriorating. This may be limited to surface delamination or some portion of the substrate may be exposed.

In Locations where damage exists in isolated areas, both good and poor condition may be applicable. The extent of each condition will be recorded. Fair condition is not utilized in the evaluation of ACM sprayed or trowelled fireproofing, sprayed or trowelled thermal insulation (non-mechanical), or texture, decorative or acoustic finishes.

The evaluation of the above products above ceilings may be limited by the number of observations and by building components such as ducts or full height walls that obstruct the above ceiling observations.

### 2.2 Friable Mechanical or Thermal System Insulation (TSI)

To evaluate the condition of mechanical insulation on vessels, boilers, breeching, ducts, pipes, fan units, equipment etc. the following criteria are applied:

<b>Good</b>	Insulation is completely covered in jacketing and exhibits no evidence of damage or deterioration. No insulation is exposed. Includes conditions where the jacketing has minor damage (i.e. scuffs or stains), but the jacketing is not penetrated.
<b>Fair</b>	Minor penetrating damage to jacketed insulation (cuts, tears, nicks, deterioration or delamination) or undamaged insulation that has never been jacketed. Insulation is exposed but not showing surface disintegration. The extent of missing insulation ranges from minor to none. Damage can be repaired.

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<b>Poor</b>	Original insulation jacket is missing, damaged, deteriorated or delaminated. Insulation is exposed and significant areas have been dislodged. Damage cannot be readily repaired. Includes components where insulation may have been removed incompletely.
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The evaluation of mechanical insulation may be limited by the number of observations made and building components such as ducts or full height walls that obstruct observations. It is often not possible to observe each foot of mechanical insulation from all angles.

### 2.3 Potentially Friable Materials and Miscellaneous Friable Materials

Potentially friable ACM are products that are basically non-friable while in place but have the potential to generate friable dust upon removal or if significantly disturbed without appropriate procedures. These products may become friable if damaged. Potentially friable materials include materials such as acoustic ceiling tiles and plaster. To evaluate the condition of potentially friable materials, the following criteria are applied:

---

<b>Good</b>	No significant damage or deterioration. Still serving its intended use as a building material or finish.
<b>Fair</b>	Showing signs of some cracking or breakage, but is not deteriorating (e.g. cracked plaster, broken but in place ceiling tile, missing tile or section of plaster etc.). The condition is such that it is still serving its intended use as a building material or finish but may require repair for mainly cosmetic purposes.
<b>Poor</b>	Significant deterioration or breaking apart of the material. Material has deteriorated to the point it is not serving its intended use as building material or finish. Material has deteriorated to a point it has become friable. Normally potentially friable ACM in Poor condition is not repairable and requires at least localized removal and replacement.

---

### 2.4 Non-Friable Materials

Non-friable ACM cover a wide range of products with a wide variation in their tendency to release dust or asbestos fibres to the air. Many of these materials, (particularly where the matrix is an unweathered bitumen, asphalt or tar material) do not release fibres except in very unusual circumstances or during significant disturbance (e.g. use of abrasive power tools). Others with a cementitious matrix (asbestos-cement products) can more readily release dust due to abrasion, demolition, weathering, etc. The potential for asbestos release from non-friable ACM is always lower than from friable ACM. To evaluate the condition of non-friable Materials, the following criteria are applied:

---

<b>Good</b>	No significant damage or deterioration. Still serving its intended use as a building material or finish.
-------------	--

---

---

<b>Fair</b>	Showing signs of some cracking or breakage but is not deteriorating (e.g. cracked vinyl floor tile, missing piece of tile or transite, etc.). The condition is such that it is still serving its intended use as a building material or finish but may require repair for mainly cosmetic purposes.
<b>Poor</b>	Significant deterioration or breaking apart of the material to the point at which it cannot be repaired, and it will require at least local removal. Material has deteriorated to the point it is not serving its intended use as building material or finish. Material may have deteriorated to a point where traffic or disturbance may cause it to become friable.

---

## 2.5 Evaluation of ACM Debris

The identification of the exact location or presence of debris on the top of ceiling tiles is limited by the number of observations made and the presence of building components such as ducts or full height walls that obstruct observations.

The presence of fallen or dislodged ACM is noted separately from the ACM source and is referred to as Debris. Debris may be friable if from a friable ACM source or a badly deteriorated non-friable ACM source. Debris may also be non-friable (such as fallen pieces of transite sheet or mastic fittings, or broken, dislodged floor tiles).

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<b>Debris</b>	Debris may be friable or non-friable but is always identified as debris.
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## 2.6 Evaluation of Presumed Asbestos-Containing Material (PACM)

Presumed asbestos-containing materials (PACM), are building materials that may contain asbestos but were not sampled or analyzed due to inaccessibility or the need to perform destructive testing to obtain a reasonable sample set. Evaluation of these materials is based on the assumption that these PACM are asbestos-containing.

A list of PACM is provided in the report and they are generally not included in the detailed room by room reports. Typically, they are excluded because they are inaccessible or present in very small quantities. If PACM are evaluated, Pinchin uses the criteria that correspond with the type (and friability) of the material listed above.

### 3.0 EVALUATION OF ACCESSIBILITY

The accessibility of building materials known or suspected of being ACM is rated according to the following criteria:

<b>Access (A)</b>	Common areas of the building within reach of all building users (approximately 8' - 9' from floor or standard ceiling height). Includes other areas where occupant activities may result in disturbance of material that is not normally within reach from floor level, but may be disturbed by common activities (e.g. gymnasiums, workshops)
<b>Access (B)</b>	Areas of the building accessed primarily by Maintenance/Caretaking/Janitorial Staff and within reach without use of a ladder. Includes areas within reach in Boiler Rooms, Electrical Rooms, Janitors Closets, Elevator Rooms, Mechanical Rooms, etc. Includes materials within reach from fixed ladders or catwalks, mezzanines, and accessible pipe chases.
<b>Access (C) and Visible</b>	Areas of the building above 8' - 9' where use of a ladder or scaffold is required to reach the ACM. Only includes ACM that are visible to view without the removal or opening of other building components such as ceiling tiles or service access panels. Visible column on HMIS sheets will say YES.
<b>Access (C) and not Visible</b>	Areas of the building above 8' - 9' where use of a ladder or scaffold is required to reach the ACM. Includes ACM that are not visible to view and require the removal of a building component to see, such as ceilings tiles or access panels to view and access. Includes rarely entered crawl spaces, attic spaces, etc. Observations will be limited to the extent visible from the access points. Visible column on HMIS sheets will say NO.
<b>Access (D)</b>	Areas of the building behind inaccessible solid ceiling systems, walls or equipment etc. where demolition of the ceiling, wall or equipment etc. is required to reach the ACM. Material inaccessible due to height or location or is only accessed under unusual situations. Evaluation of condition and extent of ACM is limited or impossible, depending on the surveyor's ability to visually examine materials in Access D.

### 4.0 ACTION MATRIX AND DEFINITIONS

Pinchin's evaluation of the viability of a specific asbestos control option is based on the consideration of the friability, condition, accessibility and visibility of a material. The logic used is that damaged ACM located in an area frequently accessed by all building occupants is of a higher priority than damaged ACM located in an infrequently accessed service area. The action matrix considers the potential for fibre release (primarily from friable ACM) and the possible concerns from regulatory bodies and many building occupants to all damaged ACM (including non-friable).

In any building with asbestos, many current regulations require an Asbestos Management Program be implemented. Depending on the condition and the accessibility, more active measures such as repair or removal may be recommended. The following matrix provides guidance for recommended Actions in the absence of renovation or demolition. In the event of construction or maintenance activity which will disturb ACM more aggressive control or removal will be required.

#### 4.1 Action Matrix

The following tables outline the action decisions based on the relationship of assessed factors. Table I applies to friable ACM. Table II applies to non-friable ACM.

**Table I Decision Matrix for Friable ACM**

Access	Condition			Debris
	Good	Fair	Poor	
(A)	Action 5 <sup>1</sup>	Action 5 <sup>2</sup>	Action 3	Action 1
(B)	Action 7	Action 6 <sup>3</sup>	Action 3	Action 1
(C) Visible	Action 7	Action 6	Action 3	Action 2
(C) Not Visible	Action 7	Action 7	Action 4	Action 2
(D)	Action 7	Action 7	Action 7	Action 7

**Table II Decision Matrix for Potentially Friable and Non-Friable ACM**

Access	Condition			Debris
	Good	Fair	Poor	
(A)	Action 7	Action 7 <sup>4</sup>	Action 3	Action 1
(B)	Action 7	Action 7	Action 3	Action 1
(C) Visible	Action 7	Action 7	Action 4	Action 2
(C) Not Visible	Action 7	Action 7	Action 4	Action 2
(D)	Action 7	Action 7	Action 7	Action 7

#### 4.2 Action Definitions

The following are the definitions in the Action Matrix Table presented above:

##### Action Definitions

<b>Action 1</b>	Clean-Up of ACM Debris Restrict access that is likely to cause a disturbance of the ACM Debris and clean up ACM Debris. Utilize appropriate asbestos precautions.
-----------------	--

<sup>1</sup> If friable ACM in access (A)/Good condition is not proactively removed Action 7 (Manage) is recommended.

<sup>2</sup> If friable ACM in access (A)/Fair condition is not proactively removed repair is recommended.

<sup>3</sup> If friable ACM in access (B)/Fair condition is likely to be disturbed after repair proactive removal is recommended.

<sup>4</sup> Action 7 is recommended for all non-friable ACM in Fair condition however some clients may wish to repair or take some action primarily for cosmetic reasons



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### Action Definitions

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<b>Action 2</b>	<p>Precautions for Access Which may Disturb ACM Debris</p> <p>Use appropriate means to isolate the debris or to limit entry to the area which may disturb the material. At locations where ACM Debris can remain in place in lieu of removal or clean-up (e.g. Debris on top of ceiling tiles or behind lockable door), Utilize appropriate asbestos precautions to enter the area if this will disturb debris. The precautions will be required until the ACM Debris has been cleaned up.</p>
<b>Action 3</b>	<p>ACM Removal</p> <p>Remove ACM. Utilize asbestos procedures appropriate to the scope of the removal work. Until it is removed, restrict access to the material so it is not disturbed.</p>
<b>Action 4</b>	<p>Precautions for Work Which may Disturb ACM in Poor Condition. Utilize appropriate asbestos precautions if ACM may be disturbed by work on or near ACM. This does not require restricting access to the area, only control of work which may contact or disturb the ACM. Removal is the only viable option if work will disturb ACM.</p>
<b>Action 5</b>	<p>Proactive ACM Removal</p> <p>Remove friable ACM where the presence of friable asbestos in Good condition is not desirable. If friable ACM in Fair condition is not removed, then Repair friable ACM.</p>
<b>Action 6</b>	<p>ACM Repair</p> <p>Repair friable ACM in Fair condition which is not likely to be damaged again or disturbed by normal use of the area or room. Pinchin recommends proactive removal if friable ACM is likely to be damaged or disturbed during normal use of the area or room</p>
<b>Action 7</b>	<p>Asbestos Management Program with Routine Surveillance Implement an Asbestos Management Program, including routine surveillance of ACM. Reassess materials regularly (typically once per year).</p>

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Master Template: Methodology Annex A to Appendix I Evaluation Criteria, HAZ, January 10, 2020



**APPENDIX IV**  
**Location Summary Report**

**Client:** Halton Region  
**Building Name:** Allendale Long Term Care  
**Survey Date:**  
**Building Phases:** A: 1992

**Site:** 185 Ontario Street South, Milton, ON  
**Last Re-Assessment:**

Location No.	Name or Description	Area ft <sup>2</sup>	Floor No.	Bldg. Phase	Notes
1	Generator / Electrical / Sprinkler / Workshop	2000	B	A	
2	Corridor	1000	B	A	
3	Storage	870	B	A	
4	Garage Bays	620	B	A	
5	Ingredient Control	2400	B	A	
6	Telephones Room	800	B	A	
7	Walk In Freezers	450	B	A	
8	Preparation Kitchen	5200	B	A	
9	Condensers / Elevator Room	600	B	A	
10	Corridor	4000	B	A	
11	Garbage / Elevator Room	240	B	A	
12	Storage	360	B	A	
13	Storage	260	B	A	
14	Pharmacy	0	B	A	NAR- Bio hazard
15	Laundry Room / Office	2330	B	A	
16	Mechanical Room	100	B	A	
17	Mechanical Room	1200	B	A	
18	Meals on Wheels And Cart Storage	800	B	A	
19	Staff Washrooms And Changerooms	1500	B	A	
20	Kitchen / Storage / Walk In Freezers	900	B	A	
21	Storage	158	B	A	
22	Storage	305	B	A	
23	Cafeteria	610	B	A	
24	Milton Place	1400	1	A	
25	Friends Landing	1120	1	A	
26	Reception And Corridors	8000	1	A	
27	Cafeteria	1080	1	A	No access above ceiling tiles (30ft high)
28	Auditorium	1120	1	A	No access above ceiling tiles (30ft high)
29	Bronte House	8500	1	A	
30	Offices	720	1	A	
31	Adam's House	8500	1	A	
32	Trafalgar House	8500	1	A	
33	Courtyard Vestibule	800	1	A	
34	Office Lounge	1100	1	A	No access above ceiling tiles (30ft high)
35	Nelson House	8500	1	A	
36	Stairwells	10000		A	
37	Offices	2200	2	A	
38	Allen House	8500	2	A	
39	Pettithouse	8500	2	A	
40	Sykes House	8500	2	A	
41	Halton House	8500	2	A	
42	Office Lounge 2nd Floor	680	2	A	
43	Mechanical Room	950	2	A	

**APPENDIX V**

**Asbestos Material Summary Report / Sample Log**

HAZARDOUS MATERIALS SUMMARY / SAMPLE LOG

Client: Halton Region			Site: 185 Ontario Street South, Milton, ON			Building Name: Allendale Long Term Care			Survey Date:			
HAZMAT	Sample No	System/Component/Material/Sample Description	Locations	Bldg. Phase	LF	SF	EA	%	Type	Positive	Friability	
Asbestos	S0001 ABCDEFG	Wall    Paint   Concrete Block	1,2,3,4,5,6,8,9,10,11,12,13,15,16,17,18,19 20,21,22,23,36	A	0	79620	0	0	None Detected	No		
Asbestos	S0002 ABC	Other    Firestopping (mastic)   Red	1,3,10,11,12,13,15,17,18,19,21,22,43	A	0	62	0	0	None Detected	No		
Asbestos	S0003 ABC	Other    Firestopping (mastic)   Maroon	1,2	A	0	10	0	0	None Detected	No		
Asbestos	S0004 ABC	Other    Firestopping (mastic)   Blue/grey	1	A	0	5	0	0	None Detected	No		
Asbestos	S0005 ABC	Other    Firestopping (friable)   Cementitious	1,2,3,4,5,8,9,10,12,13,15,16,17,18,19,21,22	A	0	149	0	0	None Detected	No		
Asbestos	S0006 ABC	Floor    Vinyl Floor Tile And Mastic   12x12 Light Blue With White Fleck	3,4,10,17,38,39	A	0	4165	0	0	None Detected	No		
Asbestos	S0007 ABC	Floor    Vinyl Floor Tile And Mastic   12x12 Dark Blue	13	A	0	780	0	0	None Detected	No		
Asbestos	S0008 ABC	Floor    Vinyl Sheet Flooring   Beige With Sparkles	7,8,15,18,19	A	0	7980	0	0	None Detected	No		
Asbestos	S0009 ABCDEFG	Wall, Ceiling, Wall    Drywall And Joint Compound	15,26,27,28,30,33,34,36,37,42,43	A	0	69120	0	0	None Detected	No		
Asbestos	S0010 ABC	Duct    Mastic, Grey	5,8,11,12,13,15,18,20,21,22,24,25,26,27,29 30,31,32,33,34,35,37,38,39,40,41,42,43	A	0	0	0	100	None Detected	No		
Asbestos	S0011 ABC	Floor    Vinyl Floor Tile And Mastic   Beige Peel And Stick	10	A	0	10	0	0	None Detected	No		
Asbestos	S0012 ABC	Floor    Vinyl Floor Tile And Mastic   12x12 Brown With Light Brown And White Fleck	10	A	0	1000	0	0	None Detected	No		
Asbestos	S0013 ABC	Floor    Vinyl Floor Tile And Mastic   12x12 Grey With Brown And White Fleck	10	A	0	200	0	0	None Detected	No		
Asbestos	S0014 ABC	Floor    Vinyl Floor Tile And Mastic   12x12 Blue With Dark Blue And White Fleck	10	A	0	10	0	0	None Detected	No		
Asbestos	S0015 ABCDE	Wall    Plaster	10	A	0	1600	0	0	None Detected	No		
Asbestos	S0016 ABC	Floor    Vinyl Sheet Flooring   Multi Colour Wave Pattern	21,30,37	A	0	158	0	0	None Detected	No		
Asbestos	S0017 ABC	Floor    Vinyl Sheet Flooring   Green Wave Pattern	22	A	0	305	0	0	None Detected	No		
Asbestos	S0018 ABC	Other    Caulking   Butyl	10,24,25,26,27,28,29,30,31,32,33,34,35,37,38 39,40,41,42	A	1030	0	0	0	Chrysothile	Yes	NF	
Asbestos	S0019 ABC	Wall    Drywall And Joint Compound	25	A	0	2240	0	0	None Detected	No		
Asbestos	S0020 ABC	Wall    Drywall And Joint Compound	24	A	0	2800	0	0	None Detected	No		
Asbestos	S0021 ABC	Floor    Vinyl Sheet Flooring   Wood Style	26,27,28,29,31,32,35,38,39,40,41	A	0	77500	0	0	None Detected	No		
Asbestos	S0022 ABC	Wall    Wall Covering   Tectum	27,28	A	0	1800	0	0	None Detected	No		

2023-08-25

Quantities shown above are based on visual approximations only and may be subject to variation. Copyright Pinchin Ltd. 2023

HAZARDOUS MATERIALS SUMMARY / SAMPLE LOG

HAZMAT	Sample No	System/Component/Material/Sample Description	Locations	Bldg. Phase	LF	SF	EA	%	Type	Positive	Friability
Asbestos	S0023 ABC	Wall, Ceiling    Drywall And Joint Compound	29	A	0	25500	0	0	Detected	No	
Asbestos	S0024 ABC	Floor    Vinyl Floor Tile And Mastic   12x12 White Black Dots/splatter	29,31,35,38,39,40,41	A	0	4800	0	0	Detected	No	
Asbestos	S0025 ABC	Floor    Vinyl Floor Tile And Mastic   12x12 Grey With Beige Streaks	36	A	0	200	0	0	Detected	No	
Asbestos	S0026 ABC	Wall, Ceiling    Drywall And Joint Compound	31	A	0	25500	0	0	Detected	No	
Asbestos	S0027 ABC	Wall, Ceiling    Drywall And Joint Compound	32	A	0	17000	0	0	Detected	No	
Asbestos	S0028 ABC	Wall, Ceiling    Drywall And Joint Compound	35	A	0	25500	0	0	Detected	No	
Asbestos	S0029 ABC	Wall, Ceiling    Drywall And Joint Compound	38	A	0	25500	0	0	Detected	No	
Asbestos	S0030 ABC	Wall, Ceiling    Drywall And Joint Compound	39	A	0	25500	0	0	Detected	No	
Asbestos	S0031 ABC	Wall, Ceiling    Drywall And Joint Compound	40	A	0	25500	0	0	Detected	No	
Asbestos	S0032 ABC	Wall, Ceiling    Drywall And Joint Compound	41	A	0	25500	0	0	Detected	No	
Asbestos	S0033 AC	Floor    Vinyl Floor Tile And Mastic   12x12 Grey With Dark Grey And White Fleck	29,32,34,35,37,38,39,40,41	A	0	1000	0	0	Detected	No	
Asbestos	S0034 ABC	Floor    Epoxy   Blue Wave Pattern	33	A	0	800	0	0	Detected	No	
Asbestos	V9500	Wall    Mortar   Thin-set	8,18,20	A	0	3600	0	0	Presumed Asbestos	Yes	NF
Asbestos	V0000	Ceiling    Ceiling Tile (mechanically Fastened)	31	A	0	0	0	0	Non Asbestos	No	
Asbestos	V0000	Ceiling    Ceiling Tiles (lay-in)   24x48 Drywall	18,20,23,29,31,32,35,38,39,40,41	A	0	0	0	0	Non Asbestos	No	
Asbestos	V0000	Ceiling    Ceiling Tiles (lay-in)   24x48 Pinhole With Fleck	3,12,13,15,19,21,22,24,25,26,27,28,29,30,31,32,33,34,35,37,38,39,40,41,42	A	0	0	0	0	Non Asbestos	No	
Asbestos	V0000	Ceiling    Ceiling Tiles (lay-in)   24x48 Pinhole With Width Wise Fissure	10,24,25,29,31,32,35,38,39,40,41	A	0	0	0	0	Non Asbestos	No	
Asbestos	V0000	Wall    Drywall And Joint Compound	23	A	0	0	0	0	Non Asbestos	No	

**Legend:**

Sample number	
S####	Asbestos sample collected
L####	Paint sample collected
P####	PCB sample collected
M####	Mould sample collected
V####	Material visually similar to numbered sample collected
V0000	Known non Hazardous Material
V9000	Material is visually identified as Hazardous Material
V9500	Material is presumed to be Hazardous Material
[Loc. No.]	Abated Material

Units		
SF	Square feet	NF
LF	Linear feet	F
EA	Each	PF
%	Percentage	

Non Friable material.  
Friable material  
Potentially Friable material

**APPENDIX VI**  
**HMIS Data Report**

ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings      **Building Name:** Allendale Long Term Care  
**Location:** #1 : Generator / Electrical / Sprinkler / Workshop      **Floor:** B  
**Survey Date:** 2023-06-14      **Last Re-Assessment:** 0000-00-00      **Area (sqft):** 2000

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
	Ceiling	Fibreglass			C	Y											
	Duct	Not Insulated			C	Y											
	Floor	Concrete (poured)			A	Y											
	Mechanical Equipment	Fibreglass			A	Y											
	Other	Firestopping (mastic), Red			C	Y		5			SF	S0002A	None Detected	N.D.	None		
	Other	Firestopping (mastic), Maroon			C	Y		5			SF	S0003A	None Detected	N.D.	None		
	Other	Firestopping (mastic), Blue/grey			C	Y		5			SF	S0004ABC	None Detected	N.D.	None		
	Other	Firestopping (friable), Cementitious			C	Y		10			SF	S0005A	None Detected	N.D.	None		
	Piping	Fibreglass			A	Y											
	Structure	Not Accessible															
	Wall	Concrete (poured)			A	Y											
	Wall	Masonry			A	Y											
	Wall	Metal			A	Y											
	Wall	Paint, Concrete block			A	Y		4000			SF	S0001AB	None Detected	N.D.	None		



ALL DATA REPORT

**Client:** Halton Region  
**Location:** #2 : Corridor  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 1000

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Fibreglass			C	Y											
Duct		Not Insulated			C	Y											
Floor		Concrete (poured)			A	Y											
Mechanical Equipment		None Found															
Other		Firestopping (mastic), Maroon			C	Y		5			SF	S0003BC	None Detected	N.D.	None		
Other		Firestopping (friable), Cementitious			C	Y		10			SF	S0005B	None Detected	N.D.	None		
Piping		Fibreglass			A	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Metal			A	Y											
Wall		Paint, Concrete block			A	Y		4000			SF	S0001C	None Detected	N.D.	None		

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #3 : Storage  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 870

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling Floor		Fibreglass Concrete (poured)			C	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 light blue with white fleck			A	Y		870			SF	S0006A	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Firestopping (mastic), Red			C	Y		5			SF	S0002B	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious			C	Y		10			SF	S0005C	None Detected	N.D.	None	
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Concrete (poured)			A	Y										
Wall		Masonry			A	Y										
Wall		Metal			A	Y										
Wall		Paint, Concrete block			A	Y		4000			SF	V0001	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #4 : Garage Bays  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 620

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Fibreglass			C	Y											
Duct		Not Insulated			C	Y											
Floor		Concrete (poured)			A	Y											
Floor		Vinyl Floor Tile and Mastic, 12x12 light blue with white fleck			A	Y		60			SF	S0006B	None Detected	N.D.	None		
Mechanical Equipment		None Found															
Other		Firesopping (friable), Cementitious			C	Y		10			SF	V0005	None Detected	N.D.	None		
Piping		Fibreglass			A	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Metal			A	Y											
Wall		Paint, Concrete block			A	Y		4000			SF	V0001	None Detected	N.D.	None		

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #5 : Ingredient Control  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 2400

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Fibreglass			C	Y											
Duct		Not Insulated			C	Y											
Duct		Mastic, Grey			C	Y	100							N.D.	None		
Floor		Concrete (poured)			A	Y					%	V0010	None Detected				
Floor		Epoxy			A	Y											
Mechanical Equipment		None Found															
Other		Firesopping (friable), Cementitious			C	Y	10				SF	V0005	None Detected	N.D.	None		
Piping		Fibreglass			A	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Metal			A	Y											
Wall		Paint, Concrete block			A	Y	4800				SF	V0001	None Detected	N.D.	None		

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #6 : Telephones Room  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 800

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Metal			C	Y											
Duct		None Found															
Floor		Concrete (poured)			A	Y											
Mechanical Equipment		Fibreglass			C	Y											
Piping		Not Insulated			C	Y											
Structure		None Found			A	Y											
Wall		Masonry			A	Y											
Wall		Metal			A	Y											
Wall		Paint, Concrete block			A	Y		1600			SF	V0001	None Detected	N.D.	None		

**Client:** Halton Region  
**Location:** #7 : Walk In Freezers  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 450

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Metal			C	Y											
Duct		None Found															
Floor		Vinyl Sheet Flooring, Blue with sparkles			A	Y		450			SF	V0008	None Detected	N.D.	None		
Mechanical Equipment		Fibreglass			C	Y											
Piping		Not Insulated			C	Y											
Structure		None Found			A	Y											
Wall		Metal			A	Y											

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #8 : Preparation Kitchen  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 5200

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Fibreglass			C	Y											
Duct		Not Insulated			C	Y											
Duct		Mastic, Grey			C	Y	100				%	S0010C	None Detected	N.D.	None		
Floor		Concrete (poured)			A	Y											
Floor		Vinyl Sheet Flooring, Beige with sparkles			A	Y	5200				SF	S0008C	None Detected	N.D.	None		
Mechanical Equipment		None Found															
Other		Firesopping (friable), Cementitious			C	Y	10				SF	V0005	None Detected	N.D.	None		
Piping		Fibreglass			A	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Ceramic Tiles			A	Y											
Wall		Metal			A	Y											
Wall		Paint, Concrete block			A	Y	8000				SF	V0001	None Detected	N.D.	None		
Wall		Mortar, Thin-set			D	N	2400				SF	V9500	Presumed Asbestos		Presumed Asbestos		NF

ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings      **Building Name:** Allendale Long Term Care  
**Location:** #9 : Condensers / Elevator Room      **Floor:** B      **Room #:**      **Area (sqft):** 600  
**Survey Date:** 2023-06-14      **Last Re-Assessment:** 0000-00-00

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Fibreglass			C	Y											
Duct		Not Insulated			C	Y											
Floor		Concrete (poured)			A	Y											
Mechanical Equipment		None Found															
Other		Firestopping (friable), Cementitious			C	Y		10			SF	V0005	None Detected	N.D.	None		
Piping		Fibreglass			A	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Metal			A	Y											
Wall		Paint, Concrete block			A	Y		1200			SF	V0001	None Detected	N.D.	None		

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #10 : Corridor  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 4000

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling Floor		Fibreglass Concrete (poured)			C	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 light blue with white fleck			A	Y		2780			SF	S0006C	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, Beige peel and stick			A	Y		10			SF	S0011ABC	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 brown with light brown and white fleck			A	Y		1000			SF	S0012ABC	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with brown and white fleck			A	Y		200			SF	S0013ABC	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 blue with dark blue and white fleck			A	Y		10			SF	S0014ABC	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		100			LF	S0018ABC	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Other		Firestopping (mastic), Red			C	Y		5			SF	V0002	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious			C	Y		10			SF	V0005	None Detected	N.D.	None	
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Concrete (poured)			A	Y										
Wall		Plaster			A	Y		1600			SF	S0015ABC DE	None Detected	N.D.	None	
Wall		Masonry			A	Y										
Wall		Metal			A	Y										
Wall		Paint, Concrete block			A	Y		8000			SF	S0001DFG	None Detected	N.D.	None	

1 - 08/16/08



ALL DATA REPORT

**Client:** Halton Region  
**Location:** #11 : Garbage / Elevator Room  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 240

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		None Found			C	Y											
Duct		Not Insulated			C	Y		100			%	S0010B	None Detected	N.D.	None		
Floor		Mastic, Grey Concrete (poured)			A	Y											
Mechanical Equipment		None Found															
Other		Firestopping (mastic), Red			C	Y		5			SF	S0002C	None Detected	N.D.	None		
Piping		Not Insulated			A	Y											
Structure		Concrete (poured)			C	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Paint, Concrete block			A	Y		220			SF	V0001	None Detected	N.D.	None		

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #12 : Storage  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 360

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Fibreglass			C	Y										
Duct		Mastic, Grey			C	Y		100								
Floor		Concrete (poured)			A	Y						V0010	None Detected	N.D.	None	
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Firestopping (mastic), Red			C	N		5			SF	V0002	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious			C	N		10			SF	V0005	None Detected	N.D.	None	
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Masonry			A	Y										
Wall		Paint, Concrete block			A	Y		4000			SF	V0001	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings  
**Location:** #13 : Storage      **Floor:** B  
**Survey Date:** 2023-06-14      **Building Name:** Allendale Long Term Care  
**Room #:**      **Area (sqft):** 260  
**Last Re-Assessment:** 0000-00-00

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Fibreglass			C	Y										
Duct		Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 dark blue			A	Y		780			SF	S0007ABC	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Firestopping (mastic), Red			C	N		5			SF	V0002	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious			C	N		10			SF	V0005	None Detected	N.D.	None	
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Masonry			A	Y										
Wall		Paint, Concrete block			A	Y		4000			SF	V0001	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #15 : Laundry Room / Office  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 2330

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Metal			A	Y										
Duct		Mastic, Grey			C	Y		100				S0010A	None Detected	N.D.	None	
Floor		Concrete (poured)			A	Y										
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Sheet Flooring, Blue with sparkles			A	Y		2330			SF	S0008AB	None Detected	N.D.	None	
Floor		Carpet			A	Y										
Mechanical Equipment		None Found														
Other		Firestopping (mastic), Red			C	N		5			SF	V0002	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious Fibreglass			C	N		10			SF	V0005	None Detected	N.D.	None	
Piping					A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		1200			SF	S0009AB	None Detected	N.D.	None	
Wall		Masonry			A	Y										
Wall		Metal			A	Y										
Wall		Paint, Concrete block			A	Y		4000			SF	V0001	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #16 : Mechanical Room  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 100

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Fibreglass			C	Y											
Duct		Not Insulated			C	Y											
Floor		Concrete (poured)			A	Y											
Mechanical Equipment		None Found															
Other		Firestopping (friable), Cementitious			C	Y		2			SF	V0005	None Detected	N.D.	None		
Piping		Fibreglass			A	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Metal			A	Y											
Wall		Paint, Concrete block			A	Y		200			SF	V0001	None Detected	N.D.	None		

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #17 : Mechanical Room  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 1200

ASBESTOS																	
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable	
Ceiling		Fibreglass			C	Y											
Floor		Concrete (poured)			A	Y											
Floor		Vinyl Floor Tile and Mastic, 12x12 light blue with white fleck			A	Y		150			SF	V0006	None Detected	N.D.	None		
Mechanical Equipment		Fibreglass			A	Y											
Other		Firestopping (mastic), Red			C	Y		5			SF	V0002	None Detected	N.D.	None		
Other		Firestopping (friable), Cementitious			C	Y		10			SF	V0005	None Detected	N.D.	None		
Piping		Fibreglass			A	Y											
Structure		Concrete (poured)			C	Y											
Wall		Concrete (poured)			A	Y											
Wall		Masonry			A	Y											
Wall		Paint, Concrete block			A	Y		2400			SF	V0001	None Detected	N.D.	None		

ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings      **Building Name:** Allendale Long Term Care  
**Location:** #18 : Meals on Wheels And Cart      **Floor:** B  
**Storage**      **Room #:**      **Area (sqft):** 800  
**Survey Date:** 2023-06-14      **Last Re-Assessment:** 0000-00-00

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
	Ceiling	Ceiling Tiles (lay-in), 24x48 drywall			C	Y						V0000	Non-Asbestos		None	
	Duct	Mastic, Grey			C	Y	100				%	V0010	None Detected	N.D.	None	
	Floor	Vinyl Sheet Flooring, Grey with sparkles			A	Y						V0008	None Detected	N.D.	None	
	Mechanical Equipment	Fibreglass			C	N										
	Other	Firestopping (mastic), Red			C	N	5				SF	V0002	None Detected	N.D.	None	
	Other	Firestopping (friable), Cementitious			C	N	2				SF	V0005	None Detected	N.D.	None	
	Piping	Fibreglass			A	Y										
	Structure	Concrete (poured)			C	N										
	Wall	Masonry			A	Y										
	Wall	Ceramic Tiles			A	Y										
	Wall	Paint, Concrete block			A	Y	1000				SF	V0001	None Detected	N.D.	None	
	Wall	Mortar, Thin-set			D	N	600				SF	V9500	Presumed Asbestos		Presumed Asbestos	NF

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #19 : Staff Washrooms And Changerooms  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Area (sqft):** 1500  
**Last Re-Assessment:** 0000-00-00

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Floor		Vinyl Sheet Flooring, Beige with sparkles			A	Y						V0008	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Firestopping (mastic), Red			C	N		2			SF	V0002	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious			C	N		5			SF	V0005	None Detected	N.D.	None	
Piping		Fibreglass			A	Y										
Structure		Concrete (poured)			C	N										
Wall		Masonry			A	Y										
Wall		Paint, Concrete block			A	Y		3000			SF	S0001E	None Detected	N.D.	None	

1 - 03/07/22



ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings      **Building Name:** Allendale Long Term Care      **Area (sqft):** 900  
**Location:** #20 : Kitchen / Storage / Walk In Freezers      **Floor:** B  
**Survey Date:** 2023-06-14      **Last Re-Assessment:** 0000-00-00

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y						V0000	Non-Asbestos		None	
Duct		Mastic, Grey			C	Y	100				%	V0010	None Detected	N.D.	None	
Mechanical Equipment		Fibreglass			C	N										
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Masonry			A	Y										
Wall		Ceramic Tiles			A	Y										
Wall		Paint, Concrete block			A	Y	1000					SF	None Detected	N.D.	None	
Wall		Mortar, Thin-set			D	N	600					SF	Presumed Asbestos		Presumed Asbestos	NF

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #21 : Storage  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 158

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling Duct		Fibreglass Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Multi colour wave pattern			A	Y		158			SF	S0016ABC	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Firestopping (mastic), Red			C	N		5			SF	V0002	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious			C	N		10			SF	V0005	None Detected	N.D.	None	
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Masonry			A	Y										
Wall		Paint, Concrete block			A	Y		4000			SF	V0001	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #22 : Storage  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 305

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling Duct		Fibreglass Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Green wave pattern			A	Y		305			SF	S0017ABC	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Firestopping (mastic), Red			C	N		5			SF	V0002	None Detected	N.D.	None	
Other		Firestopping (friable), Cementitious			C	N		10			SF	V0005	None Detected	N.D.	None	
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Masonry			A	Y										
Wall		Paint, Concrete block			A	Y		4000			SF	V0001	None Detected	N.D.	None	

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #23 : Cafeteria  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** B

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 610

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y						V0000	Non-Asbestos		None	
Duct		Not Insulated			C	N										
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Piping		Fibreglass			C	N										
Structure		Concrete (poured)			C	N										
Wall <sup>1</sup>		Drywall and joint compound			A	Y						V0000	Non-Asbestos		None	
Wall		Masonry			A	Y										
Wall		Paint, Concrete block			A	Y		200			SF	V0001	None Detected	N.D.	None	

1 - Built in 2022

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #24 : Milton Place  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 1400

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Fibreglass			C	Y						V0010	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y		100								
Floor		Concrete (poured)			A	Y										
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure		Concrete (poured)			C	N										
Wall		Drywall and joint compound			A	Y		2800			SF	S0020ABC	None Detected	N.D.	None	

1 - 03/07/22  
2 - 08/16/08

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #25 : Friends Landing  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 1120

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Fibreglass			C	Y					%	V0010	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y		100								
Floor		Concrete (poured)			A	Y										
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure		Concrete (poured)			C	N										
Wall		Drywall and joint compound			A	Y		2240			SF	S0019/ABC	None Detected	N.D.	None	

1 - 03/07/22  
2 - 08/16/08

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #26 : Reception And Corridors  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8000

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Drywall and joint compound			C	Y	5000				SF	V0009	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y	100				%	V0010	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y	8000				SF	S0021AB	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y	200				LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure		Concrete (poured)			C	N										
Wall		Drywall and joint compound			A	Y	16000				SF	S0009CDE FG	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #27 : Cafeteria  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 1080

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling Duct		Drywall and joint compound Mastic, Grey			C	Y	5000				SF	V0009	None Detected	N.D.	None	
Duct	Not Accessible				C	Y	100				%	V0010	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y	1080				SF	S0021C	None Detected	N.D.	None	
Mechanical Equipment	Not Accessible															
Mechanical Equipment	Not Accessible															
Other		Caulking, Butyl			A	Y	200				LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping	Not Accessible															
Wall		Drywall and joint compound			A	Y	2060				SF	V0009	None Detected	N.D.	None	
Wall		Wall covering, Tectum			C	Y	700				SF	S0022C	None Detected	N.D.	None	

No access above ceiling tiles (30ft high)  
1 - 03/07/22



ALL DATA REPORT

**Client:** Halton Region  
**Location:** #28 : Auditorium  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 1120

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Drywall and joint compound			C	Y		5000			SF	V0009	None Detected	N.D.	None	
Duct	Not Accessible															
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Sheet Flooring, Wood style			A	Y		1120			SF	V0021	None Detected	N.D.	None	
Floor		Carpet			A	Y										
Mechanical Equipment	Not Accessible															
Other		Caulking, Butyl			A	Y		200			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping	Not Accessible															
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		16000			SF	V0009	None Detected	N.D.	None	
Wall		Wall covering, Tectum			C	Y		1100			SF	S0022AB	None Detected	N.D.	None	

No access above ceiling tiles (30ft high)

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #29 : Bronte House  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8500

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y						V0000	Non-Asbestos		None	
Ceiling		Drywall and joint compound			C	N		8500			SF	V0023	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	S0024ABC	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		100			SF	S0033A	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style Laminate			A	Y		7800			SF	V0021	None Detected	N.D.	None	
Mechanical Equipment		None Found			A	Y										
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0023ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

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ALL DATA REPORT

**Client:** Halton Region  
**Location:** #30 : Offices  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 720

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling Duct		Fibreglass Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Multi colour wave pattern			A	Y						V0016	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping Structure		Fibreglass Concrete (poured)			A	Y										
Wall		Drywall and joint compound			A	Y		1440			SF	V0009	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings  
**Location:** #31 : Adam's House      **Floor:** 1  
**Survey Date:** 2023-06-15      **Building Name:** Allendale Long Term Care  
**Room #:**      **Area (sqft):** 8500  
**Last Re-Assessment:** 0000-00-00

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tile (mechanically fastened)	Surface	N/A	C	Y		X			SF	V0000	Non-Asbestos		None	
Ceiling		Drywall and joint compound			C	N		8500			SF	V0026	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	V0024	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	V0024	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y		8500			SF	V0021	None Detected	N.D.	None	
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0026ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

1 - 03/07/22  
2 - 08/16/08

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #32 : Trafalgar House  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8500

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y		8500				V0027	None Detected	N.D.	None	
Ceiling		Drywall and joint compound			C	N		100			%	V0010	None Detected	N.D.	None	
Duct		Mastic, Grey			A	Y										
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		100			SF	S0033C	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y		8500			SF	V0021	None Detected	N.D.	None	
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0027ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

1 - 03/07/22

2 - 08/16/08

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #33 : Courtyard Vestibule  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 800

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Drywall and joint compound			C	Y	100				SF	V0009	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y	100				%	V0010	None Detected	N.D.	None	
Floor		Epoxy, Blue wave pattern			A	Y	800				SF	S0034ABC	None Detected	N.D.	None	
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y	50				LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure		Concrete (poured)			C	N										
Wall		Drywall and joint compound			A	Y	150				SF	V0009	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #34 : Office Lounge  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 1100

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling Duct		Fibreglass Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		100			SF	V0033	None Detected	N.D.	None	
Floor		Carpet			A	Y										
Floor		Carpet			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping Structure		Fibreglass Concrete (poured)			A	Y										
Wall		Drywall and joint compound			A	Y		1440			SF	V0009	None Detected	N.D.	None	

No access above ceiling tiles (30ft high)  
1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #35 : Nelson House  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 1

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8500

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y		8500			SF	V0028	None Detected	N.D.	None	
Ceiling		Drywall and joint compound			C	Y		100			%	V0010	None Detected	N.D.	None	
Duct		Mastic, Grey			A	Y										
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		200			SF	V0033	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	V0024	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y		8500			SF	V0021	None Detected	N.D.	None	
Floor		Carpet			A	Y										
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0028/ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

1 - 03/07/22  
2 - 08/16/08



ALL DATA REPORT

**Client:** Halton Region  
**Location:** #36 : Stairwells  
**Survey Date:** 2023-06-14

**Site:** Buildings  
**Floor:**

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 10000

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling		Drywall and joint compound			C	Y		10000			SF	V0009	None Detected	N.D.	None	
Duct		None Found														
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with beige streaks			A	Y	200				SF	S0025ABC	None Detected	N.D.	None	
Mechanical Equipment Piping		None Found														
Wall		Fibreglass			A	Y										
Wall		Concrete (poured)			A	Y										
Wall		Masonry			A	Y										
Wall		Paint, Concrete block			A	Y	12000				SF	V0001	None Detected	N.D.	None	

**Client:** Halton Region  
**Location:** #37 : Offices  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 2

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 2200

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Fibreglass			C	Y										
Duct		Mastic, Grey			C	Y	100				%	V0010	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y	100				SF	V0033	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Multi colour wave pattern			A	Y						V0016	None Detected	N.D.	None	
Floor		Carpet			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y	20				LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure		Concrete (poured)			C	N										
Wall		Drywall and joint compound			A	Y	1440				SF	V0009	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #38 : Allen House  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 2

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8500

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with wide wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y		8500			SF	V0029	None Detected	N.D.	None	
Ceiling		Drywall and joint compound			C	Y		100			%	V0010	None Detected	N.D.	None	
Duct		Mastic, Grey			A	Y										
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	V0024	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		100			SF	V0033	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 light blue with white fleck			A	Y		300			SF	V0006	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y		8500			SF	V0021	None Detected	N.D.	None	
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0029ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

1 - 03/07/22  
2 - 08/16/08

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #39 : Pettitthouse  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 2

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8500

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with wide wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y		8500			SF	V0030	None Detected	N.D.	None	
Ceiling		Drywall and joint compound			C	Y		100			%	V0010	None Detected	N.D.	None	
Duct		Mastic, Grey			A	Y										
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	V0024	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		100			SF	V0033	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 light blue with white fleck			A	Y		5			SF	V0006	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y		8500			SF	V0021	None Detected	N.D.	None	
Floor		Carpet			A	Y										
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0030ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #40 : Sykes House  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 2

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8500

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y						V0000	Non-Asbestos		None	
Ceiling		Drywall and joint compound			C	N		8500			SF	V0031	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	V0024	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		100			SF	V0033	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y		8500			SF	V0021	None Detected	N.D.	None	
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0031ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

1 - 03/07/22  
2 - 08/16/08

ALL DATA REPORT

**Client:** Halton Region  
**Location:** #41 : Halton House  
**Survey Date:** 2023-06-15

**Site:** Buildings  
**Floor:** 2

**Building Name:** Allendale Long Term Care  
**Room #:**  
**Last Re-Assessment:** 0000-00-00

**Area (sqft):** 8500

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling <sup>2</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with width wise fissure			C	Y						V0000	Non-Asbestos		None	
Ceiling		Ceiling Tiles (lay-in), 24x48 drywall			C	Y						V0000	Non-Asbestos		None	
Ceiling		Drywall and joint compound			C	N		8500			SF	V0032	None Detected	N.D.	None	
Duct		Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Concrete (poured)			A	Y										
Floor		Vinyl Floor Tile and Mastic, 12x12 white black dots/splatter			A	Y		600			SF	V0024	None Detected	N.D.	None	
Floor		Vinyl Floor Tile and Mastic, 12x12 Grey with dark Grey and white fleck			A	Y		100			SF	V0033	None Detected	N.D.	None	
Floor		Vinyl Sheet Flooring, Wood style			A	Y		8500			SF	V0021	None Detected	N.D.	None	
Floor		Laminate			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			C	N										
Structure	Not Accessible															
Wall		Drywall and joint compound			A	Y		17000			SF	S0032ABC	None Detected	N.D.	None	
Wall		Masonry			A	Y										

1 - 03/07/22  
2 - 08/16/08

ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings  
**Location:** #42 : Office Lounge 2nd Floor      **Floor:** 2  
**Survey Date:** 2023-06-15      **Building Name:** Allendale Long Term Care  
**Room #:**      **Area (sqft):** 680  
**Last Re-Assessment:** 0000-00-00

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling <sup>1</sup>		Ceiling Tiles (lay-in), 24x48 pinhole with fleck			C	Y						V0000	Non-Asbestos		None	
Ceiling		Fibreglass			C	Y										
Duct		Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Carpet			A	Y										
Floor		Carpet			A	Y										
Mechanical Equipment		None Found														
Other		Caulking, Butyl			A	Y		20			LF	V0018	Chrysotile	0.5-5%	Confirmed Asbestos	NF
Piping		Fibreglass			A	Y										
Structure		Concrete (poured)			C	N										
Wall		Drywall and joint compound			A	Y		1440			SF	V0009	None Detected	N.D.	None	

1 - 03/07/22

ALL DATA REPORT

**Client:** Halton Region      **Site:** Buildings  
**Location:** #43 : Mechanical Room      **Floor:** 2  
**Survey Date:** 2023-06-15      **Building Name:** Allendale Long Term Care  
**Room #:**      **Area (sqft):** 950  
**Last Re-Assessment:** 0000-00-00

ASBESTOS																
System	Component	Material	Item	Covering	A*	V*	AP*	Good	Fair	Poor	Unit	Sample	Asbestos Type	Amount	Hazard	Friable
Ceiling		Drywall and joint compound			C	Y		950			SF	V0009	None Detected	N.D.	None	
Ceiling		None Found														
Duct		Not Insulated			C	Y										
Duct		Mastic, Grey			C	Y		100			%	V0010	None Detected	N.D.	None	
Floor		Concrete (poured)			A	Y										
Mechanical Equipment		None Found														
Other		Fires topping (mastic), Red			C	Y		5			SF	V0002	None Detected	N.D.	None	
Piping		Not Insulated			A	Y										
Structure		Concrete (poured)			C	Y										
Wall		Concrete (poured)			A	Y										
Wall		Drywall and joint compound			A	Y		1900			SF	V0009	None Detected	N.D.	None	
Wall		Masonry			A	Y										

## Legend:

Sample number	Units	Other
S#### Asbestos sample collected	SF Square feet	A Access
V#### Material visually similar to numbered sample collected	LF Linear feet	V Visible
V0000 Known non-asbestos material	EA Each	AP Air Plenum
V9000 Visually identified as an asbestos material	% Percentage	F Friable material
V9500 Material is presumed to be an asbestos material		NF Non Friable material
		PF Potentially Friable material

Access	Condition
A Accessible to all building occupants	Good No visible damage or deterioration
B Accessible to maintenance and operations staff without a ladder	Fair Minor, repairable damage, cracking, delamination or deterioration
C Accessible to maintenance and operations staff with a ladder. Also rarely entered, locked areas	Poor Irreparable damage or deterioration with exposed and missing material
D Not normally accessible	

Visible	Air Plenum
Y The material is visible when standing on the floor of the room, without the removal or opening of other building components (e.g. ceiling tiles or access panels).	Yes The material is in a return air plenum or in a direct airstream or there is evidence of air erosion (e.g. duct for heating or cooling blowing directly on or across an ACM). This field is only completed where Air Plenum consideration is required by regulation.
N The material is not visible to view when standing on the floor of the room and requires the removal of a building component (e.g. ceilings tiles or access panels) to view and access. Includes rarely entered crawlspaces, attic spaces, etc. Observations will be limited to the extent visible from the access points.	No The material is not visible to view when standing on the floor of the room and requires the removal of a building component (e.g. ceilings tiles or access panels) to view and access. Includes rarely entered crawlspaces, attic spaces, etc. Observations will be limited to the extent visible from the access points.

Colour Coding
<span style="background-color: #FFC0CB; border: 1px solid black; display: inline-block; width: 20px; height: 10px;"></span> The material is known to contain regulated concentrations of asbestos; either by analytical results or visible identification (use of the V9000 code).
<span style="background-color: #FFFF00; border: 1px solid black; display: inline-block; width: 20px; height: 10px;"></span> The material is presumed to contain asbestos; based on visual appearances; typically a material known to historically contain asbestos; however, not sampled due to limited access or the destructive nature of the sampling.



# APPENDIX D

## SUBSTITUTION REQUEST FORM

We hereby submit for your consideration the following product instead of the specified item for the following project:

Project # and Name: \_\_\_\_\_

Drawing # and Name: \_\_\_\_\_

Specification Section: \_\_\_\_\_

Specified Item / Product: \_\_\_\_\_

Proposed Substitution: \_\_\_\_\_

Attach complete information on changes that will be required to Bid / Contract Drawings and Specifications as a result of the proper installation of the proposed substitution.

Submit, with request, all necessary product data and samples as well as substantiating data to prove equal quality and performance of substitution to specified product. Clearly mark manufacturer's literature to indicate equality in performance.

Request for substitutions of the materials and equipment described in the Contract Documents will be considered during the bidding period only upon receipt of a completed Substitution Request Form with all back up documents before the Cut Off for Questions Period identified in the Supplementary Instruction to Bidders.

### CERTIFICATION OF EQUAL PERFORMANCE AND ASSUMPTION OF LIABILITY FOR EQUAL PERFORMANCE

The undersigned states that the function, appearance, and quality are equivalent or superior to the specified item.

Submitted by:

\_\_\_\_\_  
Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Firm

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
E-mail

For Use by Owner's Representative or Consultant:

\_\_\_\_\_ Accepted

\_\_\_\_\_ Accepted as Noted

\_\_\_\_\_ Not Accepted

\_\_\_\_\_ Not Considered (Received late)

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

**Fill in the Blanks Below:**

A. Does the substitution affect dimensions shown on Drawings? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, clearly indicate changes:

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B. Will the bidder / Contractor pay for changes to the building design, including engineering and detailing costs caused by the requested substitution? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, fully explain: \_\_\_\_\_

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C. What effect does substitution have on other sub-contractors or trades?

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D. What effect does substitution have on construction schedule?

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E. Manufacturer's warranties of the proposed and specified items are:

\_\_\_\_\_ Same \_\_\_\_\_ Different

If different, explain: \_\_\_\_\_

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F. Reason for Request: \_\_\_\_\_

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G. Itemized comparison of specified item(s) with proposed substitution:

List significant variations: \_\_\_\_\_

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H. Accurate cost data comparing proposed substitution with product specified:

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(ATTACH ADDITIONAL SHEETS IF REQUIRED)