



December 1, 2020

ADDENDUM NO. 1

Notice to All Persons and Firms Proposing
to Submit a Bid or Furnish Materials for
Tesshire Drive Bridge No. 400
St. Louis County Project No. CR-1669
Federal Project No. BRO-B096(003)

The following clarifications are made to the Bid Proposal:

No. 1

See attached for supplemental information for the asbestos inspection report which was completed for the Tesshire Drive Bridge No. 400. The asbestos inspection report is included in the Bid Proposal and Contract Specifications document.

ATTENTION BIDDERS: THE ADDENDUM ACKNOWLEDGEMENT IN THE BID DOCUMENTS MUST BE COMPLETED AND SUBMITTED WITH ALL BID PROPOSALS.

A handwritten signature in blue ink that reads "Pamela R. Thebeau".

Pamela R. Thebeau, P.E.
Assistant Division Manager – Engineering
Division of Project Development

PRT

EMSL ANALYTICAL, INC.
LABORATORY • PRODUCTS • TRAINING

Asbestos Chain of Custody

EMSL Order Number (Lab Use Only):

391808807

EMSL ANALYTICAL, INC.
3029 SOUTH JEFFERSON
ST. LOUIS, MO, 63118
PHONE: (314)-577-0150
FAX: (314)-776-3313

Company : Saint Louis County Dept. of Transportation		EMSL-Bill to: <input checked="" type="checkbox"/> Same <input type="checkbox"/> Different If Bill to is Different note instructions in Comments**	
Street: 1050 North Lindbergh		Third Party Billing requires written authorization from third party	
City: Saint Louis	State/Province: MO	Zip/Postal Code: 63132	Country:
Report To (Name): Monica Cheney		Fax #:	
Telephone #: 314-615-3254		Email Address: mcheney@stlouisco.com	
Project Name/Number: Teshshire Road Bridge No. 400			
Please Provide Results: <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email		Purchase Order:	U.S. State Samples Taken: MO
Turnaround Time (TAT) Options* - Please Check			
<input type="checkbox"/> 3 Hour	<input type="checkbox"/> 6 Hour	<input type="checkbox"/> 24 Hour	<input type="checkbox"/> 48 Hour <input type="checkbox"/> 72 Hour <input checked="" type="checkbox"/> 96 Hour <input type="checkbox"/> 1 Week <input type="checkbox"/> 2 Week
*For TEM Air 3 hr through 6 hr, please call ahead to schedule. *There is a premium charge for 3 Hour TEM AHERA or EPA Level II TAT. You will be asked to sign an authorization form for this service. Analysis completed in accordance with EMSL's Terms and Conditions located in the Analytical Price Guide.			
PCM - Air <input type="checkbox"/> NIOSH 7400 <input type="checkbox"/> w/ OSHA 8hr. TWA PLM - Bulk (reporting limit) <input checked="" type="checkbox"/> PLM EPA 600/R-93/116 (<1%) <input type="checkbox"/> PLM EPA NOB (<1%) Point Count <input type="checkbox"/> 400 (<0.25%) <input type="checkbox"/> 1000 (<0.1%) Point Count w/Gravimetric <input type="checkbox"/> 400 (<0.25%) <input type="checkbox"/> 1000 (<0.1%) <input type="checkbox"/> NYS 198.1 (friable in NY) <input type="checkbox"/> NYS 198.6 NOB (non-friable-NY) <input type="checkbox"/> NIOSH 9002 (<1%)		TEM - Air <input type="checkbox"/> 4-4.5hr TAT (AHERA only) <input type="checkbox"/> AHERA 40 CFR, Part 763 <input type="checkbox"/> NIOSH 7402 <input type="checkbox"/> EPA Level II <input type="checkbox"/> ISO 10312 TEM - Bulk <input type="checkbox"/> TEM EPA NOB <input type="checkbox"/> NYS NOB 198.4 (non-friable-NY) <input type="checkbox"/> Chatfield SOP <input type="checkbox"/> TEM Mass Analysis-EPA 600 sec. 2.5 TEM - Water: EPA 100.2 Fibers >10µm <input type="checkbox"/> Waste <input type="checkbox"/> Drinking All Fiber Sizes <input type="checkbox"/> Waste <input type="checkbox"/> Drinking	
		TEM- Dust <input type="checkbox"/> Microvac - ASTM D 5755 <input type="checkbox"/> Wipe - ASTM D6480 <input type="checkbox"/> Carpet Sonication (EPA 600/J-93/167) Soil/Rock/Vermiculite <input type="checkbox"/> PLM CARB 435 - A (0.25% sensitivity) <input type="checkbox"/> PLM CARB 435 - B (0.1% sensitivity) <input type="checkbox"/> TEM CARB 435 - B (0.1% sensitivity) <input type="checkbox"/> TEM CARB 435 - C (0.01% sensitivity) <input type="checkbox"/> EPA Protocol (Semi-Quantitative) <input type="checkbox"/> EPA Protocol (Quantitative) Other:	
<input checked="" type="checkbox"/> Check For Positive Stop - Clearly Identify Homogenous Group			
Samplers Name: Monica Cheney		Samplers Signature:	

Sample #	Sample Description	Volume/Area (Air) HA # (Bulk)	Date/Time Sampled
HA-1A	Expansion Material - SE Bridge Rail Center	1A	8/8/18 10:00 am
HA-1B	Expansion Material - SE Bridge Rail South End	1B	8/8/18 10:00 am
HA-1C	Expansion Material - NW Bridge Rail	1C	8/8/18 10:00 am
HA-2A	Laclede Gas Line - Center	2A	8/8/18 10:00 am
HA-2B	Laclede Gas Line - N. End	2B	8/8/18 10:00 am
HA-2C	Laclede Gas Line - S. End	2C	8/8/18 10:00 am

Client Sample # (s):	1A,1B,1C - 2A,2B,2C	Total # of Samples:	6
Relinquished (Client):	<i>[Signature]</i> Date: 8/16/18	Time:	12:00 pm
Received (Lab):	<i>[Signature]</i> Date: 8-16-18	Time:	12:00 w/i
Comments/Special Instructions:			