

September 15, 2023

City of Madison
Attn: Mr. Gerald Smith, Facilities Director
100 Hughes Road
Madison, Alabama 35758

RE: Proposal to Conduct a Limited Asbestos Containing Building Materials Survey of the Residential Structure located at 225 Mill Road in Madison, Alabama (TTSI Proposal # P23141)

Mr. Smith,

Terrell Technical Services, Inc. is pleased to submit the following proposal to conduct a limited asbestos containing building material survey of the residential structure located at 225 Mill Road in Madison, Alabama.

EPA Accredited and State of Alabama Licensed Asbestos Inspectors will be utilized to perform the effort. All analyses will be performed by a laboratory accredited by the National Institute of Standards and Technology / National Voluntary Laboratory Accreditation Program (NIST/NVLAP) for asbestos containing materials.

Representative samples of potential asbestos containing building materials will be collected and submitted for analysis. The locations, quantities, and condition of asbestos containing materials will be provided in the report. The final report will be available within one week after the site work is completed. The proposed cost for this scope of work would be a **not to exceed cost of \$1,750.00**. This cost includes all labor, supplies/materials, mileage/travel expenses, analytical fees, reporting, and administration costs.

If you have any questions concerning this proposal or the proposed scope of work, please feel free to contact me at 256-461-9278 or Neil Matson at the same location.

Sincerely,



Elliott Terrell, CEICI, CIEC
Senior Project Manager
EPA Accredited Asbestos Inspector / Management Planner APL0121658024
EPA Licensed Lead Inspector / Risk Assessor LRA0820658024

TERRELL TECHNICAL SERVICES, INC.
PROPOSAL ACCEPTANCE FORM

PROPOSAL NO: P23141

By signing below, the person authorizes to execute contracts, acknowledges acceptance of the proposed scope of work and conditions stated in Proposal P23141, dated July 6, 2023 and agrees to pay the proposed fee with 30 days of receipt of invoice.

Client = Party that Authorizes TTSI to Provide the Proposed Services

Client: _____

Address: _____

Executed By: _____

Signature: _____

Title: _____

Date: _____

Invoice To (if different from client above):

Firm: _____

Address: _____

Contact Name & Title _____

Contact Phone: _____

Contact Email: _____