



FORENSIC APPLICATIONS CONSULTING TECHNOLOGIES, INC.

**Regulatory Audit
of
Preliminary Assessment Report
By
Joe F. Boatman, PhD, QEP
at an
Identified Illegal Drug Laboratory**

**Located at:
731 Excelsior Place,
Lafayette, CO 80026**

Finding of 344 Regulatory Violations

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TABLE OF CONTENTS

EXECUTIVE SUMMARY	3
REVIEW OF THE DOCUMENT	3
Violation of Section 4.2.....	3
Violation of Paragraph 4.3.....	4
Violation of Paragraph 4.3.1.....	4
Violation of Paragraph 4.3.2 (Seven Violations)	5
Violation of Paragraph 4.5.....	5
Violation of Paragraph 4.6.....	6
Violation of Paragraph 4.7.....	6
Violation of Paragraph 4.9.....	7
Violation of Paragraph 4.11.1.....	7
Violation of Section 4.15	8
Violation of Section 4.15.1	8
Violation of Section 4.15.3 (Two Violations)	9
Violation of Section 4.17	9
Violation of Section 4.17.1	11
Violation of Section 4.17.3	12
Violation of Section 4.17.4	12
Violation of Section 4.17.4	12
Violation of Paragraph 6.1.3.....	12
Violation of Paragraph 6.1.3.2.....	13
Violation of Paragraph 6.1.3.3.....	13
Violation of Paragraph 6.1.3.5.....	13
Violation of Paragraph 6.2.1 (57 Wipe Violations)	14
Violation of Paragraph 6.2.1 (57 Media Violations).....	16
Violation of Paragraph 6.2.2 (57 Template Violations)	16
Violation of Paragraph 6.2.2 (Four Surface Area Violations).....	17
Violation of Section 6.2.3	17
Violation of Section 6.2.7 (55 Violations)	18
Violation of Section 6.2.12	19
Violation of Section 6.2.12.1 (Three Violations).....	19
Violation of Section 6.2.12.4 (Three Violations).....	19
Violation of Paragraph 6.2.12.5.....	20
Violation of Paragraph 6.2.14.....	20
Violation of Paragraph 6.2.14.3 (Sampler Identified)	21
Violation of Paragraph 6.2.14.6 (21 Violations- Number of Aliquots)	21
Violation of Paragraph 6.2.14.7 (21 Violations- Number of Containers).....	21
Violation of Paragraph 6.2.14.9 (21 Violations- Matrix)	21
Violation of Paragraph 6.2.14.11.....	21
Violation of Paragraph 6.3.5.....	22
Violation of Section 6.3.6 (Three Violations)	23
Violation of Paragraph 6.5.....	23
Violation of Paragraph 6.9.1.....	24
Violation of Paragraph 6.9.1(Two Violations).....	24
Violation of Paragraph 6.9.7.....	24
Violation of Paragraph 6.9.7.....	25
CONCLUSION.....	25
Appendix A	26
Reviewer's Statement of Qualifications.....	26



EXECUTIVE SUMMARY

Forensic Applications Consulting Technologies, Inc. (FACTs) is performing a series of regulatory audits on public domain documents. This document has been prepared by Forensic Applications Consulting Technologies, Inc. as part of an ongoing Motion for Judicial Review in response to unlawful actions by the Boulder County Department of Health and Colorado Department of Public Health and Environment (CDPHE), and pursuant to the provisions of C.R.S. 18-8-115 *Duty to report a crime - liability for disclosure*.

This review pertains to the document identified as:

Quality Environmental Services
Preliminary Assessment
731 Excelsior Place, Lafayette, CO 80026
Joe F. Boatman, PhD, QEP
March 25, 2015

The purpose of this review is to document regulatory violations associated with regulatory work regarding the assessment of methamphetamine affected properties. The level of scrutiny employed in this review is that which has been established by Mr. Michael Richen (Boulder County Department of Health) in his review of work performed by FACTs, Inc.

The Contractor in question, Quality Environmental Services (QES), has a limited history of regulatory violations.¹

For this regulatory audit, FACTs has identified no fewer than 344 individual regulatory violations in 17 broad regulatory categories.

REVIEW OF THE DOCUMENT

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific mandatory tasks and provide specific mandatory documentation. In reviewing the report associated with 731 Excelsior Place, Lafayette, CO 80026, FACTs has identified the following deficiencies.

Violation of Section 4.2

During the performance of a Preliminary Assessment, the Consultant is required by regulations to provide specific mandatory information, including:

¹ 769 Cleveland Circle, Lafayette, CO 80026, February 10, 2015 , CO (Secure review available here: http://forensic-applications.com/meth/BCDH_Secure/Boatman_Cleveland_RA.pdf) Username required: BCHA_01; Password required: BCHealth_01



4.2 Summary of information from review of available law enforcement reports regarding the manufacturing method, chemicals present, cooking areas, chemical storage areas, and areas of contamination, or waste disposal.

Nowhere in the reviewed report has QES documented any attempt to obtain law enforcement documents or ascertain the availability of such documents. Therefore, the locations of pertinent areas within the structure, as may have been identified by law enforcement personnel have not been provided.

Violation of Paragraph 4.3

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

4.3 Description of structural features in all buildings, such as attics, false ceilings, crawl spaces, and basements, including:

The QES report states that the subject unit, has no attic, however, the regulations require the identification of “Description of structural features in all buildings, such as attics...” There is no information in the QES report to indicate if the structure has an attic or not.

In his report, QES states:

There was no accessible Attic above Unit 8D

There is no description of why Unit 8D is important, or how this unit is related to the Subject property. There is no description of an attic in relation to the subject property, or why Unit 8D is even mentioned in the report.

Violation of Paragraph 4.3.1

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

4.3.1 If the building has an attic, a description of the integrity of the building ceiling (i.e., attic floor), any signs of access, storage, manufacturing, or venting into the attic (e.g., holes cut in ceiling for the purpose of venting gases from a cook),

The QES report contains a photograph of a penetration in the ceiling of the second floor which identifies the penetration as a bathroom vent. Therefore, one may presume there is an attic in the structure (although this is not clear from the report, as required by regulations).

Nowhere in the QES report is there any description of the following mandatory elements:

Building ceiling conditions
Attic Storage
Attic Venting



According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

4.3.1 ...a description of observations of the ducting associated with all bathroom and kitchen exhaust vents.

Throughout the QES report, the author identifies both kitchen and bathroom exhausts as being present. In violation of §4.3.1, there is no description of the bathroom or kitchen vents or were these vents go or terminate.

Violation of Paragraph 4.3.2 (Seven Violations)

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

4.3.2 A description of the integrity of the building floor, and if there is a crawl space, a description of any signs of access, storage, venting, or disposal related to methamphetamine manufacturing, integrity of any vapor barriers, and any signs of disposal onto the soil of the crawl space. ...

QES was required to describe the following:

- Signs of access
- Existence and/or condition of vapor barrier
- Evidence of storage
- Venting (the photographs provided by QES clearly show some kinds of vents)
- Disposal related to methamphetamine manufacturing
- Integrity of any vapor barriers
- Signs of disposal onto the soil of the crawl space

Nowhere in the QES report, do we see where QES has provided these descriptions as required by regulations.

Violation of Paragraph 4.5

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

4.5 Identification of manufacturing methods based on the Consultant's observations and law enforcement reports, if available.

As already documented, there is no evidence that QES attempted to ascertain the availability of or obtain any law enforcement documents. There is no documentation to indicate that the author of the report as ever received any kind of training in illegal drug laboratories or their assessment and therefore would not be expected to possess the necessary skills needed to identify signs of illegal dumping if they were present.

Indeed, there is no indication that the author of the report is an Industrial Hygienist (a mandatory requirement for the Interim Authorization claimed). Based on previous work by this consultant, Dr. Boatman has exhibited a lack of training and knowledge in the



science of Industrial Hygiene. There is nothing in the documentation that would indicate that Dr. Boatman would meet the mandatory qualifications as identified in Colorado Revised Statutes §24-30-1402 definition of an “Industrial Hygienist.”

According to the *Colorado Department Of Regulatory Agencies, Office Of Policy And Research, Industrial Hygienists, And Safety Professionals 2001 Sunrise Review* (October 15, 2001) Mr. M. Michael Cooke, Executive Director stated:

Another avenue of redress is the Colorado Consumer Protection Act. This law prohibits individuals from misrepresenting their certification, abilities, and associations, and making false or misleading statements concerning the price of goods, services, or property. In addition, §6-1-707(1)(a)(I), C.R.S., prohibits an individual from claiming “either orally or in writing, to possess either an academic degree or an honorary degree of the title associated with said degree, unless the person has, in fact, been awarded said degree.” While this Act does not prevent individuals from performing industrial hygiene work, it does prohibit individuals from claiming that they have education or background that they do not possess. An individual who misrepresents his or her qualifications may be in violation of this Act. 18 C.R.S. § 6-1-105(1)(b), (c), (e) and (l), C.R.S.

It is the opinion of FACTs that this report demonstrates the incompetence and demonstrates the problems created by the CDPHE when the CDPHE permitted literally anyone, without any kind of documented training and without any documentation of being an Industrial Hygienist to perform such assessments.

Since QES made no documented attempts to obtain any pertinent law enforcement documents from appropriate law enforcement agencies, and QES has no documented training in the assessment of illegal drug laboratories, QES could not have complied with this requirement.

Violation of Paragraph 4.6

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

4.6 Identification of chemicals used, based on the Consultant's observations and knowledge of manufacturing method(s), and if available, identification and documentation of any methamphetamine lab wastes or precursor chemicals discovered at the subject property.

As already described, QES failed to determine the availability of law enforcement documents and there would be no expectation the consultant would have the necessary professional skills to identify manufacturing methods if they were present at the property.

Violation of Paragraph 4.7

According to mandatory State regulations, the consultant is required to perform specific tasks including:

4.7 Identification and documentation of areas of contamination. This identification may be based on visual observation, law enforcement reports, proximity to chemical storage



areas, waste disposal areas, cooking areas, use areas, or the professional judgment of the Consultant.

As already demonstrated, the consultant failed to obtain law enforcement documents and failed to identify those contamination indicators that were present at the property.

If the Consultant determines that assessment sampling is appropriate, such sample collection and analysis shall be conducted in accordance with the assessment level sampling protocols and other requirements of Section 6 of this Part 1.

As described below, the consultant failed to perform such sample collection and analysis in accordance with the assessment level sampling protocols of Section 6. Part 1.

Violation of Paragraph 4.9

According to mandatory State regulations, the consultant is required to perform specific tasks including:

4.9 Identification and documentation of signs of contamination such as staining, etching, or fire damage.

As mentioned above, the consultant has no documented training or specialized knowledge in the assessment of illegal drug laboratories, and therefore, there is no information to indicate the consultant would possess the skills necessary to identify such signs. Nowhere in the report, does QES even mention “fire damage” or that they looked for such or would know what to look for.

Violation of Paragraph 4.11.1

According to mandatory State regulations, the consultant is required to perform specific tasks including:

4.11.1 If contamination above the standard is identified in any unit in a multi-unit structure with shared attics (i.e., open space with no fire walls), the shared attic spaces shall be investigated to determine whether they are also contaminated. If access is not available to inspect or sample shared attic spaces, the owner of the contaminated unit or their representative shall give notice to the owner(s) of the shared attics and the owners and tenants of the units that are immediately below the shared attic spaces that methamphetamine contamination may be present. Notice shall also be given to the homeowners’ association (HOA), if one has been established. The consultant shall document any limitations on access in the final report.

In their report, QES states:

Unit 731 had no accessible Attic.

Therefore, one may presume the attic is present, and access is not available. However, later in the report, QES states:

We did not observe any cooking areas, chemical storage areas, waste



disposal areas, or other obvious contamination inside Unit 731 or in the Attic.

Therefore, to make the statement, QES must have seen the attic. Therefore, either QES never inspected the attic, (and therefore would not have known if “*cooking areas, chemical storage areas, waste disposal areas, or other obvious contamination inside Unit 731 or in the Attic*” or the attic was inspected and QES failed to provide photographic documentation of the attic as required.

QES should have notified the owner they were required to

...give notice to the owner(s) of the shared attics and the owners and tenants of the units that are immediately below the shared attic spaces that methamphetamine contamination may be present. Notice shall also be given to the homeowners’ association (HOA), if one has been established.

Nowhere in the QES report, do we see where this information has been addressed.

Violation of Section 4.15

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific duties, including:

4.15 If assessment sampling is conducted, it shall be conducted in accordance with Section 6 of this Part 1. Documentation of assessment sampling shall include:

As discussed below, sampling was not conducted pursuant to the requirements of Section 6 and none of the samples collected were collected pursuant to Section 6.

Violation of Section 4.15.1

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific duties, including:

4.15.1 a description of the sampling procedures used, including sample collection, handling, and QA/QC;

In their report, QES states:

The sampling procedures, sample collection, sample handling, and QA/QC were conducted in general conformance with the Colorado Department of Public Health and Environment Regulations Pertaining to the Cleanup of Methamphetamine-Affected Properties (6 CCR 1014-3) Section 6.

As documented below, the QA/QC entirely failed to meet “*conformance with the Colorado Department of Public Health and Environment Regulations Pertaining to the Cleanup of Methamphetamine-Affected Properties (6 CCR 1014-3) Section 6.*”



Otherwise, nowhere in the QES report is QA/QC even mentioned, and nowhere in the report has QES described their QA/QC procedures or why they failed to meet the QA/QC field blank requirements. According to Mr. Richen (Boulder County Department of Health) failure to “resolve” field blank issues warrants rejection of the entire report.

Violation of Section 4.15.3 (Two Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to provide specific information including:

4.15.3 ... a computer generated figure illustrating the layout of the building(s) ...

Nowhere in their report has QES provided a computer generated figure of the layout of the buildings. Nowhere in the QES is the layout of the buildings(s) given. The QES report only provides a floor plan purporting to be 731 and does not include a drawing of the crawlspace or the layout of the building itself.

4.15.3 results of sampling, including a description of sample locations and a computer generated figure illustrating the layout of the building(s) **and sample locations...**

In their report, QES failed to comply with the regulations when they failed to provide the computer generated figures for the sample purported to have been collected in the crawlspace.

Violation of Section 4.17

During the performance of a Preliminary Assessment, the Consultant is required by regulations to provide specific information including:

4.17 If clearance sampling is conducted during the preliminary assessment, it shall be conducted in accordance with Section 6 of this Part 1. Documentation of clearance sampling shall include:

In his report, QES erroneously states:

This was a Methamphetamine Preliminary Inspection. Clearance sampling will be completed at a later date.

And yet, QES did conduct clearance sampling. For example, in their report QES explicitly stated:

The Washer, the Dryer, the Stove, and the Refrigerator were tested and found not to be contaminated by Methamphetamine. They can be released to the owner.

(Later in this discussion we will describe why the sampling QES performed in the appliances was invalid and violated the mandatory regulations).



According to the regulations:

§4.8 In the case of single-family dwellings, all rooms, attics, crawl spaces, and forced air ventilation systems of all buildings on the subject property must be assumed to be contaminated above the cleanup standards of Section 7, unless sampling conducted in accordance with the clearance level sampling protocols of Section 6 demonstrates the absence of such contamination in a given room, attic, crawl space, or ventilation system.

Therefore, the sampling QES conducted in the case of the appliances was clearance sampling, to the extent that QES (incorrectly) declared the appliances compliant and cleared them from the need for remediation.

Furthermore, a consultant trained in the aspects of illegal drug laboratory assessments would not have conducted the sampling as performed by QES at this property since the results were a foregone conclusion anyway. That is, a legitimately trained consultant would have been able to conduct limited sampling to ascertain the compliance status of the property.

A trained consultant would not have wasted the financial resources of the Boulder County Housing Authority by collecting and analyzing samples that were not required by regulations.

Sampling in each room, etc, as performed by QES would have only been performed on the extremely rare chance of identifying a specific room as compliant. As it is, there is no rationale to the conclusion QES applied to their results.

For example, QES claimed the following:

The trigger limit for Methamphetamine (sic) is 0.5 ug per 100 cm sq cm. The following rooms and locations were found to contain Methamphetamine (sic) at concentrations above the trigger limit.

- 1. 1st Floor Kitchen/Dining Rooms.*
- 2. 1st Floor Bath Exhaust.*
- 3. Crawl Space.*
- 4. 1st Floor Utility Room.*
- 5. 2nd Floor Bath Exhaust.*
- 6. HVAC System.*

Yet, when we look at the results we see something entirely different. For example, the “trigger” for the crawlspace is not 0.5 µg/100cm² as claimed – the “trigger” is 4.0 µg/100 cm², and according to QES, the result of their (invalid) sample was 0.7 µg/100 cm². This would have indicated the crawlspace was compliant with regulations and no cleaning was needed.



Similarly, QES erroneously stated:

The following rooms and locations were found not to contain Methamphetamine at concentrations above the trigger limit.

- 1. 2nd Floor Hall Bath.*
- 2. Washer/Dryer Inside.*
- 3. Stove Interior.*
- 4. Washer/Dryer Outside.*
- 5. Refrigerator Interior.*
- 6. 1st Floor Bath.*
- 7. 1st Floor Kitchen Exhaust.*
- 8. Stove/Refrigerator Exterior.*
- 9. 2nd Floor Laundry.*
- 10. 2nd Floor South Bedroom.*
- 11. 2nd Floor North Bedroom.*
- 12. 2nd Floor Hall.*
- 13. 1st Floor Living Room.*

Yet, when we look at the sample that was collected from the 2nd Floor Hall Bath, we see the concentration of methamphetamine was 1.6 µg/100 cm², which is above the regulatory threshold, and not below the threshold as claimed.

Similarly, QES also falsely claimed the First Floor Bath was compliant, and yet the sample collected from the First Floor Bath was 0.67 µg/100 cm², which is above the regulatory threshold of 0.5 µg/100cm².

That is, the QES consultant was entirely incapable of even interpreting his own results. Again, this indicates the Consultant (who has no documented training in performing these assessments), entirely lacked the technical competency to be performing this work, and essentially wasted the financial resources of the Boulder County Housing Authority.

As such, it is obvious that QES was attempting to exclude specific areas from remediation – that is, the QES consultant is so poorly trained, he didn't realize he was performing Clearance sampling. As such, QES was required by regulations to include the following:

Violation of Section 4.17.1

During the performance of a Preliminary Assessment, the Consultant is required by regulations to provide specific information including:

4.17 If clearance sampling is conducted during the preliminary assessment, it shall be conducted in accordance with Section 6 of this Part 1. Documentation of clearance sampling shall include:

4.17.1 A description of the sampling procedures used, including sample collection, handling, and QA/QC.



Nowhere in the report has QES described the QA/QC and failed to mention that the QA/QC used by QES failed to meet the State regulation (described later).

Violation of Section 4.17.3

During the performance of a Preliminary Assessment, the Consultant is required by regulations to provide specific information including:

4.17.3 Results of clearance sampling, including a description of sample locations **and a computer generated figure with sample locations** and identification,

Nowhere in their report, has QES provided the computer generated figures for the sample purported to have been collected in the crawlspace.

Violation of Section 4.17.4

During the performance of a Preliminary Assessment, the Consultant is required by regulations to provide specific information including:

4.17.4 Documentation of variations from standard practices.

Nowhere in his report for this subject property has QES documented the gross deviations and variations from the standard practice (regulations) as identified in this review.

Violation of Section 4.17.4

During the performance of a **Preliminary Assessment**, the Consultant is required by regulations to provide specific information including:

4.17.5 A certification statement, signed by the Consultant, in substantially the following form:

"I hereby certify that I conducted **clearance sampling** of the subject property in accordance with 6 CCR 1014-3, Part 1, § 6. I further certify that the cleanup standards established by 6 CCR 1014-3, Part 1, § 7 [***choose one***: have/have not] been met as evidenced by testing I conducted."

For this assessment, QES performed clearance testing as evidenced by the fact that QES "cleared" seven rooms, four appliances, and one ventilations system, however, nowhere in the QES report, does QES certify the clearance sampling.

Violation of Paragraph 6.1.3

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific duties including:

6.1.3 The following sample collection procedures shall be followed for screening level sampling, **preliminary assessment sampling** and **clearance sampling**, except as provided in Section 6.8.2 of this Part 1.



As described below the mandatory elements were not performed as required.

Violation of Paragraph 6.1.3.2

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific duties including:

6.1.3.2. Wipe sampling shall be used to determine the extent of lead contamination on all surfaces at properties whenever the preliminary assessment indicates the phenyl-2-propanone (P2P) method of methamphetamine manufacture was used on the property

As documented earlier in this report, law enforcement documents were not obtained, and therefore, the production process (if any at all) was not determined by the QES.

Furthermore, as already documented, the QES consultant has no documented training in the assessment of illegal drug laboratories (as evidenced by the gross technical incompetence exhibited by QES as documented in this review) and therefore, there is no expectation that the author of the report would possess the necessary skill set to determine if the P2P process was used at the property. Therefore, compliance with this section could not have been met.

Violation of Paragraph 6.1.3.3

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific duties including:

6.1.3.3 Wipe sampling shall be used to determine the extent of iodine contamination whenever there is visible evidence of iodine staining on surfaces that will not be removed

As documented earlier in this report, law enforcement documents were not obtained, and therefore, the production process (if any at all) was not determined by the QES.

Furthermore, as already documented, the QES consultant has no documented training in the assessment of illegal drug laboratories and therefore, there is no expectation that the author of the report would possess the necessary skill set to determine what process, if any, was used at the property. Therefore, compliance with this section could not have been met.

Violation of Paragraph 6.1.3.5

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific duties including:

6.1.3.5 Vapor sampling shall be used to determine the extent of mercury contamination whenever the preliminary assessment indicates the P2P method of methamphetamine manufacture was used on the property.

As already documented, law enforcement documents were not obtained, and therefore, the production process (if any at all) was not determined by the QES. Furthermore, as already stated, the QES consultant has no documented training in the assessment of illegal drug laboratories and therefore, there is no expectation that the author of the report



would possess the necessary skill set to determine what process, if any, was used at the property. Therefore, compliance with this section could not have been met.

Violation of Paragraph 6.2.1 (57 Wipe Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform specific duties including:

6.2 Discrete Wipe Sample Collection Procedures. The following procedure shall be used for collecting discrete wipe samples:

6.2.1 Sample media shall consist of 2x2 inch wipes made of one of the following:

According to QES in their report:

All the samples were collected using Methamphetamine (sic) sampling wipes moistened with isopropyl alcohol (supplied by Reservoirs Environmental, Incorporated).

The wipes provided by Reservoirs Environmental are not compliant with State regulations and may **not** be used for regulatory sampling. It was not the obligation of the analyzing laboratory to supply the correct sampling materials, rather, it was the obligation of QES to use the correct sampling materials in compliance with the regulations.

Furthermore, the photographs provided by QES in their report clearly document the sampling tubes as standard 50 ml centrifuge tubes, and by standard design, the inside diameter of the tubes is approximately 1.75 cm. The sampling pads QES documented in their photographs (inside the tubes) are not allowed by State regulations.

In any event, a photograph in the QES report (See Photograph 1 below) actually demonstrates that QES was using a different kind of wipe, and not those generally provided by Reservoirs. The photograph in the QES report indicates the wipes used by QES was actually Kroger[®] brand "Alcohol Swabs."² Those wipes (regardless of who supplied them to QES) are not compliant with State regulations. In Photograph 2 below, FACTs has provided a scaled photograph of the product depicted in the QES report. So, either way, the sampling materials used by QES were not permitted by State regulations.

² Kroger Product #KGR090731





Photograph 1 (QES Photo Showing QES Wipes)



Photograph 2 (FACTs)

Therefore the wipes used by QES for sampling are not allowed by regulations. Since none of the sampling media used during the project was permitted by regulations, none of the samples collected by QES were valid. Since there were 57 individual aliquots, each with the unlawful media, there are 57 violations of this section.

Violation of Paragraph 6.2.1 (57 Media Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform sampling pursuant to mandated protocols including:

6.2 Discrete Wipe Sample Collection Procedures. The following procedure shall be used for collecting discrete wipe samples:

6.2.1.1 Cotton gauze material.

6.2.1.2 4-ply non-woven cotton/polyester blend.

6.2.1.3 Tightly knitted continuous filament polyester.

Not only were the size of the pads used by QES unlawful, the sampling media itself was unlawful to the extent that according to Section §6.2.14.9 QES was required to identify the matrix, and failed to do so. As it is, there is nothing in the document to demonstrate QES used required sampling materials.

Since there were 57 aliquots, each with the unlawful media, there are 57 violations of this section.

Violation of Paragraph 6.2.2 (57 Template Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform sampling pursuant to mandated protocols including:

6.2.2 Delineate a 100 cm² area on the surface to be sampled, either by attaching a physical template to the surface (being careful not to touch the area within the template), or by an equivalently reliable and accurate method. The area within the template (i.e., the sample area) shall be 100 cm². Physical templates may not be re-used.

In their report, QES documented that they did not follow this mandatory protocol when they stated:

A new 100 sq cm template was held to all surfaces for sampling.

The regulations require the template to be *attached*, since holding the template to a surface with one hand and attempting to wipe the surface with the other allows the template to slip and thus, one cannot know if they actually collected 100 cm². Therefore, the method described by QES in their report cannot meet either requirement of §6.2.2 in that the template was neither attached as required, and was not an equivalently reliable and accurate method.



Violation of Paragraph 6.2.2 (Four Surface Area Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to perform sampling pursuant to mandated protocols including:

6.2.2... The area within the template (i.e., the sample area) shall be 100 cm². Physical templates may not be re-used.

If QES collected samples as they claim, then not all of their samples are 100 cm² as required by regulations. For example, if we look at QES Sample 10 (Second Floor Bathroom exhaust), we see that the surface is approximately 50% empty space, and not surface as all. (See Photograph 3, below).



Photograph 3 by QES

Violation of Section 6.2.3

During the performance of a Preliminary Assessment, the Consultant is required by regulations to follow specific sampling protocols including:

6.2.3 Prepare a rough sketch of the area(s) to be sampled and indicate sample location(s).

Nowhere in the report is there any indication that a sketch was prepared to indicate the location of the crawlspace sample.



Violation of Section 6.2.7 (55 Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to follow specific sampling protocols including:

6.2.7 Wipe the surface using one of the following methods:

6.2.7.1 **Square method: Start at the outside edge and progress toward the center of the surface area by wiping in concentric squares of decreasing size.**

6.2.7.2 "S" method: Wipe horizontally from side-to-side in an overlapping "S"- like pattern as necessary to completely cover the entire wipe area.

6.2.8 Without allowing the sample media to come into contact with any other surface, fold the sample media with the sampled side in.

6.2.9 Use the same sample media to repeat the sampling of the same area using the same method. If using the "S" method, the second pass shall be sampled by wiping with overlapping "S"-like motions in a top-to-bottom direction.

6.2.10 Fold sampled side in. Using the same sample media, sample the same area a third time. **The third pass shall be sampled by wiping using the method not previously used (i.e., use the square method if the "S" method was originally used).**

According to Mr. Richen, with the Boulder County Department of Health, failure to comply with the requirement necessarily invalidates the entire assessment.

In the QES report we see that QES has explicitly documented they did not follow this mandatory sampling protocol:

The "S" method was used to collect the samples in accordance with 6 CCR 1014-3 Part 1, Section 6.2.7 through 6.2.11.

Since there were 55 individual wipes, each was a violation.

On February 19, 2015, FACTs officially requested a variance from the provisions of §§6.2.7 through 6.2.10, especially where it was physically impossible to comply with this sampling requirement. In her response to our request,³ Ms. Brisnehan explicitly rejected this variance from the regulations:

³ February 27, 2015, letter from Colleen Brisnehan, Hazardous Waste Corrective Action Unit, Hazardous Waste Program, to Mr. Caoimhín P. Connell, Forensic Applications Consulting Technologies, Inc., 185 Bounty Hunter's Lane, Bailey, Colorado 80421, RE: Request for Variance under 6 CCR 1014-3, 788 West Lois Court, Louisville, Colorado, cc: Mr. Dan Miller - Colorado Attorney General Office, Michael Richen - Boulder County Public Health



The Regulations, as amended, merely add a third pass to increase sample recovery. The sample collection procedure included in the Regulations is based on wipe sample collection procedures developed by the Occupational Safety and Health Administration (OSHA) and the National Institute for Occupational Safety and Health (NIOSH). The sample collection procedure using the "S" method is also referenced in the NIOSH analytical methods for methamphetamine.

The Department does not consider the deviations proposed by FACTs to be *de minimis* variations from standard sampling requirements. The Department is not willing to provide FACTs a "blank check" to determine when it will or will not comply with the sample collection requirements. Therefore, the Department has determined that approval of this variance may result in substantial deviation from the intent of the regulatory requirement. This variance request is denied.

Based on the February 27, 2015, letter from Ms. Brisnehan (CDPHE,) the method used by QES at the subject property is prohibited, and therefore, ALL of the samples thus collected by the QES consultant are invalid.

Violation of Section 6.2.12

During the performance of a Preliminary Assessment, the Consultant is required by regulations to follow specific sampling protocols including:

6.2.12 Submit at least one field blank, prepared and handled in the same fashion but without wiping, for every 10 samples collected, according to the following:

As described below, this provision was not met by QES.

Violation of Section 6.2.12.1 (Three Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to follow specific sampling protocols including:

6.2.12.1 To collect a field blank, remove a wipe from the wrapper with a new glove, shake the wipe open, refold in the same manner as during the sampling procedure, and then insert the wipe into the sample container.

Nowhere in their report has QES documented that field blanks were collected in the mandatory manner. In fact, we see that the QES chain-of-custody indicates that 100 square centimeters of an unknown surface was documented by QES.

Violation of Section 6.2.12.4 (Three Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to follow specific sampling protocols including:

6.2.12.4 For projects with greater than 10 samples collected, sample 11 shall be a field blank, every 10th subsequent sample shall be a field blank, and the last sample of any sample group with fewer than 10 samples shall be a field blank.

According to the QES report, Sample 11, which should have been a field blank, contained 7.89 micrograms of methamphetamine. According to Mr. Richen with the



Boulder County Department of Health⁴ where such a field blank is not resolved, the entire assessment is rejected.

Issue 1: The report of a positive Field Blank (CM030215-04, result of 0.32 micrograms per sample) was not resolved in the report. A positive blank result should be resolved in the report since the result may indicate cross contamination problems with other samples. [Part 1 Section 6.12.8 and Section 9 "USEPA Contract Laboratory Program National Functional Guidelines for Superfund Organic Methods Data Review, Office of Superfund Remediation and Technology Innovation, United States Environmental Protection Agency, OSWER 9240.1-48, USEPA-540R-08-01 (June 2008)."]

Nowhere in the QES report do we see where this is resolved.

What we do find is that QES failed to submit the 11th sample as a field blank. Instead, QES collected 19 samples, and then submitted two blanks.

In violation of § 4.15.1, nowhere in the QES report has QES discussed this issue as required.

Violation of Paragraph 6.2.12.5

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

6.2.12.5 Field blanks shall be representative of the majority of samples collected for every sample group (i.e., discrete or composite).

In their assessment, QES collected

- A) 11 samples with four aliquots
- B) 2 samples with two aliquots
- C) 5 Discrete samples

Therefore, QES was required by regulations to submit a minimum of two field blanks with four aliquots each. In violation of §6.2.12.5, QES failed to perform this mandatory obligation.

Violation of Paragraph 6.2.14

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

6.2.14 Maintain a Chain-of-Custody Record covering the time of sample collection through final disposition. Document sample(s) collected from a single methamphetamine-affected property on one Chain-of-Custody Record. Every transfer of custody shall be noted and signed for and a copy of the record shall be kept by each individual who has signed it. Samples shall be sealed, labeled, and secured. All samples collected shall be transported directly to the laboratory. Shipping samples overnight is considered direct transport, and the shipping label shall be considered part of the Chain-of-Custody

⁴ August 7, 2015 letter to Boulder County Housing Authority and provided to FACTs by Mr. Michel Richen.



Record. Retain all sample documents for the project record and include them in the project reports. At a minimum, the Chain-of-Custody Record shall include the following:

Violation of Paragraph 6.2.14.3 (Sampler Identified)

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

6.2.14.3 sampler name and contact information;

Nowhere on the chain-of-custody is the mandatory information included. Nowhere on the chain-of-custody has the sampler been identified.

Violation of Paragraph 6.2.14.6 (21 Violations- Number of Aliquots)

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

6.2.14.6 number of sample aliquots;

This information is missing for 21 samples on the chain of custody.

Violation of Paragraph 6.2.14.7 (21 Violations- Number of Containers)

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

6.2.14.7 number of containers for each sample;

This information is missing for 21 samples on the chain of custody.

Violation of Paragraph 6.2.14.9 (21 Violations- Matrix)

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

6.2.14.9 sample matrix;

This information is missing for 21 samples on the chain of custody.

Violation of Paragraph 6.2.14.11

According to mandatory State regulations, the consultant is required to include specific information in the Preliminary Assessment including:

6.2.14.11 sample preservatives, if applicable; and

This information is missing from the chain-of-custody.



Violation of Paragraph 6.3.5

According to mandatory State regulations, the consultant is required to perform the sampling pursuant to specific protocols including:

6.3.5 All aliquots in a single composite sample collected from personal property must be collected from similar material (non-porous, porous other than textiles/fabrics, and textiles/fabrics).

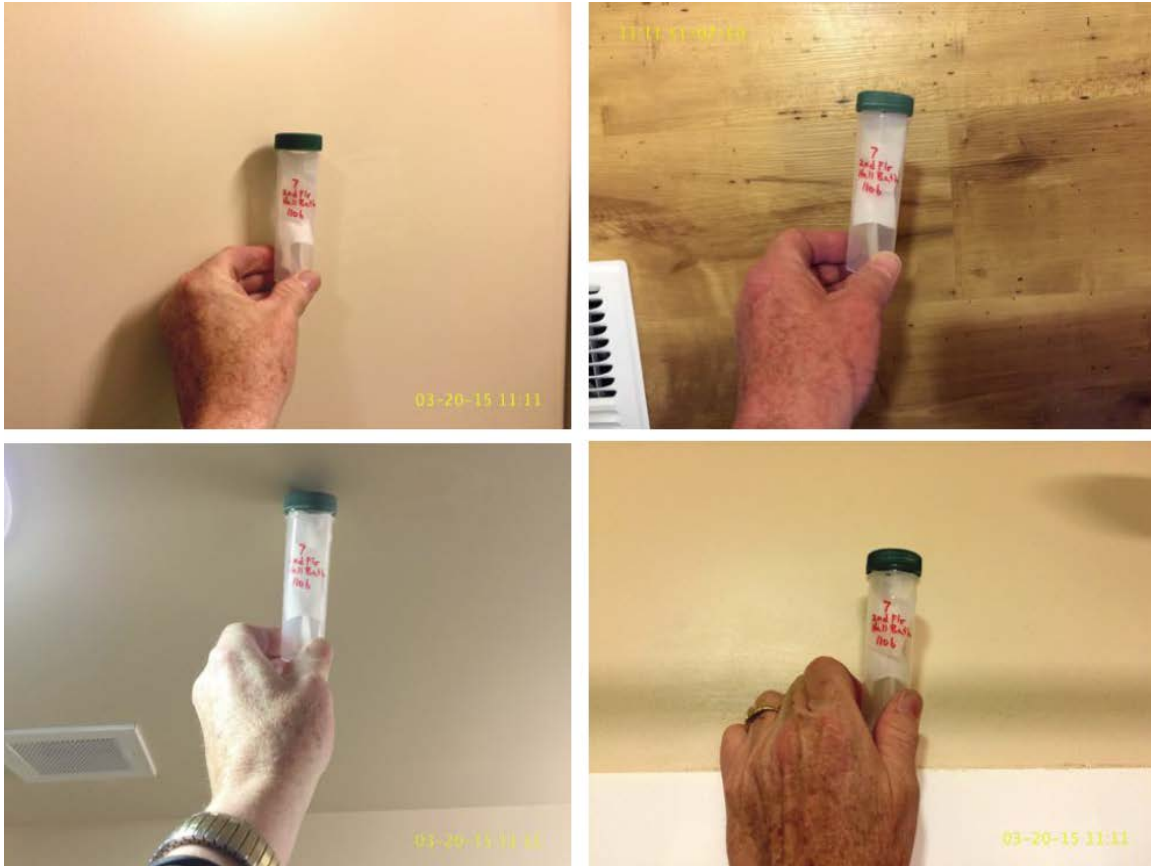
In the QES report, we see that QES collected the composites from dissimilar materials.

For example, as documented in the following photographs, QES collected samples from mixed materials:



Another example can be seen in the QES photographs, below:





Violation of Section 6.3.6 (Three Violations)

During the performance of a Preliminary Assessment, the Consultant is required by regulations to follow specific sampling protocols including:

6.3.6 Collect all individual aliquots from 100 cm² sampling areas.

As already documented above, QES failed to comply with this regulatory provision for several samples.

Violation of Paragraph 6.5

According to mandatory State regulations, the consultant is required to perform the sampling pursuant to specific protocols including:

6.5 Vapor Sample collection procedures. If the preliminary assessment indicates the phenyl-2-propanone (P2P) method of methamphetamine manufacturing was used, vapor samples for mercury shall be collected in accordance with the procedures for sample collection described in NIOSH Method 6009 as incorporated in Section 9 of this Part 1.

As already documented, there is no evidence that QES attempted to ascertain the availability of or obtain any law enforcement documents and there is no documentation to indicate that the author of the report as ever received any kind of training in illegal drug laboratories or their assessment and therefore would not be expected to possess the



necessary skills needed to identify if a P2P process had occurred. Therefore, since QES does not address the process or even describe how or why the contamination was present, it remains possible that a P2P process occurred in the property, and the issue remains unresolved.

Violation of Paragraph 6.9.1

According to mandatory State regulations, the consultant is required to perform the sampling pursuant to specific protocols including:

6.9.1 Except as provided in Section 6.9.1.1, at least 400 cm² of surface area shall be sampled from every room, attic, and crawl space.

The attic remains ambiguous – in some places QES states they inspected the attic (indicating access) and in some places QES indicates there was no access to “Unit 8D” however, since we are not told where Unit 8D is in relationship to the subject property, the reader does not know if there is access to the attic from the subject property.

In any event, there is no indication that 400 cm² was collected from the attic.

Violation of Paragraph 6.9.1(Two Violations)

According to mandatory State regulations, the consultant is required to perform the clearance sampling pursuant to specific protocols including:

6.9.4 For buildings and structures that have forced air ventilation systems, at least 400 cm² of surface area of the ventilation system shall be sampled, unless the entire ventilation system is removed. Samples **shall** be collected from accessible areas within **the heat exchanger unit, inside the cold air return system**, from inside the supply air system, and from one other location selected at the Consultant’s discretion. The Consultant will visually inspect accessible portions of the ventilation system and review photo documentation to verify that the system has been cleaned and is free of debris.

According to the QES report, samples were not collected from:

- A) With the heat exchange unit
- B) Inside the cold air return system

Violation of Paragraph 6.9.7

According to mandatory State regulations, the consultant is required to perform the sampling pursuant to specific protocols including:

6.9.7 The interior of major appliances (microwaves, refrigerators, freezers, ovens, and dryers) **must** be sampled using **discrete** samples.

The author of the QES report documented that he used composites and not discrete samples to sample the interior of the washing machine and the clothes dryer.



Violation of Paragraph 6.9.7

According to mandatory State regulations, the consultant is required to perform the sampling pursuant to specific protocols including:

6.9.11.1 Areas expected to have the highest levels of contamination, such as cooking areas, chemical storage areas, and waste disposal areas.

Since QES has no documented training in the assessment of illegal drug laboratories, QES was unaware of the fact that virtually all of his samples were collected from areas expected to have the lowest levels of contamination (for example, walls).

CONCLUSION

For this regulatory audit, FACTs has identified no fewer than 344 individual regulatory violations in 17 broad regulatory categories.



Appendix A

Reviewer's Statement of Qualifications





Forensic Applications Consulting Technologies, Inc. Consultant Statement of Qualifications

FACTs project name:	Web	Form # ML15
July 9, 2015		

Caoimhín P. Connell, has been involved in clandestine drug lab investigations since 2002 and meets the Colorado Revised Statute §24-30-1402 definition of an "Industrial Hygienist" and is authorized under 6 CCR 1014-3 to perform assessments in illegal drug laboratories. He has been a practicing Industrial Hygienist since 1987. Mr. Connell is a recognized authority in drug-lab operations and is a Certified Instructor in Meth-Lab Safety through the Colorado Regional Community Policing Institute, CRCPI (Colorado Division of Criminal Justice) and was the lead instructor for the CRCPI providing over 260 hours of methlab training for over 45 Colorado Law Enforcement Agencies, federal agents, probation and parole officers throughout Colorado judicial districts. He has provided meth-lab lectures to the US Air Force, the National Safety Council, and the American Industrial Hygiene Association (of which he is a member and serves on the Clandestine Drug Lab Work Group and for whom he conducted the May, 2010, Clandestine Drug Lab Course, and is a coauthor of the AIHA methlab assessment publication.)

Mr. Connell is a member of the American Conference of Governmental Industrial Hygienists, the Occupational Hygiene Society of Ireland, the Colorado Drug Investigators Association, an appointed Member of the National Fire Protection Association, and the ASTM International Forensic Sciences Committee, (where he was the sole sponsor of the draft ASTM E50 *Standard for the Assessment of Suspected Clandestine Drug Laboratories*).

From 2009, Mr. Connell served as the Industrial Hygiene Subject Matter Expert on the Federally funded Interagency Board (Health, Medical, and Responder Safety SubGroup), and was elected full member of the IAB-HMRS in 2011 where he now serves. He is the only private consulting Industrial Hygienist in Colorado certified by the Office of National Drug Control Policy High Intensity Drug Trafficking Area Clandestine Drug Lab Safety Program, and P.O.S.T. certified by the Colorado Department of Law.

He has received over 194 hours of highly specialized law-enforcement sensitive training in drug lab operation, and under supervision of the US DEA, he has manufactured methamphetamine using a variety of street methods. He has received highly specialized drug lab assessment training through the Iowa National Guard, Midwest Counterdrug Training Center and the Florida National Guard Multijurisdictional Counterdrug Task Force, St. Petersburg College, Rocky Mountain HIDTA, as well as through the US NHTSA, and the U.S. Bureau of Justice Assistance (US Dept. of Justice) and he is currently ARIDE Certified.

Mr. Connell is a current sworn law enforcement officer who has conducted clandestine laboratory investigations and performed risk, contamination, hazard and exposure assessments from both the law enforcement (criminal) perspective, and from the civil perspective in residences, apartments, motor vehicles, and condominiums. Mr. Connell has conducted over 594 assessments of illegal drug labs in CO, SD, NE, OK, and collected over 5,378 samples during assessments (a partial detailed list of drug lab experience is available on the web at): <http://forensic-applications.com/meth/DrugLabExperience2.pdf>

He has extensive experience performing assessments pursuant to the Colorado meth-lab regulation, 6 CCR 1014-3, and was an original team member on two of the legislative working-groups which wrote the original regulations for the State of Colorado and he was the primary contributing author of Appendix A (*Sampling Methods And Procedures*) and Attachment to Appendix A (*Sampling Methods and Procedures Sampling Theory*) of the original Colorado regulations. Mr. Connell strongly objected to the unscientific, unfounded and inappropriate amendments now applicable to those original regulations.

Recommended by the US NIOSH as Peer Review Expert for the NIOSH 9109 Method, *Methamphetamine*, he has been admitted as a drug lab expert in Colorado, and an Industrial Hygiene Expert in Colorado in both civil and criminal courts as well as Federal Court in Pennsylvania. He has provided expert testimony in several criminal cases including Grand Jury testimony and testimony for US Bureau ATF and he testified before the Colorado Board of Health and Colorado Legislature Judicial Committee regarding methlab issues. Mr. Connell has provided services to private consumers, Indian Nations, State Investigators, and Federal Investigators.



Multijurisdictional Counterdrug Task Force Training

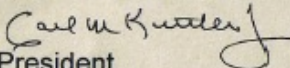


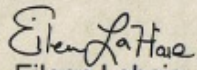
This is to certify that
Caoimhin P. Connell

Has satisfactorily completed the following 24 hour MCTFT training course held at
DIVIDE, CO

Rural Patrol

Training held 9/27/2004 through 9/29/2004


President
St. Petersburg College


Eileen Lahaie
MCTFT Director

A partnership between The Florida National Guard and St. Petersburg College

Midwest Counterdrug Training Center



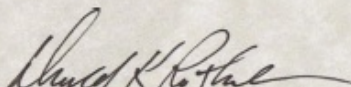
Certificate of Training

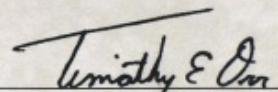
This certifies that

Caoimhin Connell

Has successfully completed the
Clandestine Laboratory Certification

Cheyenne, WY
40 Training Hours
2-6 August 2004


Network Environmental Systems, Inc.


LTC Timothy E. Orr
Commandant



Center *for* Task Force Training™

THIS IS TO CERTIFY THAT

Caoimhin P. Connell

HAS SUCCESSFULLY COMPLETED 20 HOURS OF TRAINING IN

METHAMPHETAMINE INVESTIGATION MANAGEMENT

MARCH 20-22, 2006

DENVER, COLORADO

Domingo S. Herraiz
Director, Bureau of Justice Assistance

Training coordinated by the
Institute for Intergovernmental
Research® on behalf of BJA



State and Local Anti-Terrorism Training

THIS IS TO CERTIFY THAT

Caoimhin P. Connell

HAS SUCCESSFULLY COMPLETED AN 8-HOUR
STATE AND LOCAL ANTI-TERRORISM TRAINING PROGRAM
NARCOTICS TASK FORCE ANTI-TERRORISM BRIEFING

June 1, 2006

Denver, Colorado

Domingo S. Herraiz
Director, Bureau of Justice Assistance



Training coordinated on behalf of BJA
by the Institute for Intergovernmental Research

*Rocky Mountain
High Intensity Drug Trafficking
Area*



Certifies that



Caoimhín Connell

has attended

4 hours of

Hash Oil Extraction: The Scene and The Patient

Aurora, CO

July 25, 2014

Training Manager, Rocky Mountain HIDTA

Director, Rocky Mountain HIDTA



www.nesglobal.net

Certificate of Completion

Caoimhin Connell

has successfully completed training in

Advanced Clan Labs: Beyond the Basics

presented by

NES, Inc.

1141 Sibley Street Folsom, CA 95630

Instructor - Brian Escamilla

04/28/14 04/30/14

Date

Contact Hours:24

This certifies that

Caoimhin P Connell

Has met the requirements for the online course

Expert Testimony Training for the Prosecutor and Scientist



11-07-2012

Certificate Number: 1109778763

For more information please visit <http://www.rti.org/forensiced>



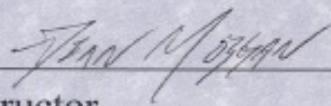
Park County Sheriff's Office Certificate of Completion

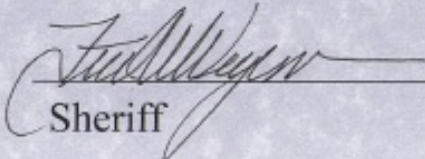
Caoimhin Connell

has completed an 8 hour course in:

Crime-scene Approach and Evidence Collection

Completed this 29th day of April, 2009


Instructor


Sheriff

***Rocky Mountain
High Intensity Drug Trafficking
Area***



Certifies that



Caoimhín P. Connell

*has attended
2 hours of
Hash Oil Explosions
Woodland Park, CO
May 31, 2014*

Training Manager, Rocky Mountain HIDTA

Director, Rocky Mountain HIDTA

Certificate of Completion

This Will Certify That

Caoimhín P. Connell

Successfully Completed

Prescription Drug Crimes

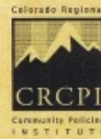
7 Hours Completed

At: CO Law Enforcement Officers Assn. On: September 30, 2010
Greeley, Colorado



P. Ritch Wagner
Instructor

Director, Law Enforcement Liaison & Education



Certificate of Training

This is to certify that
Caoimhin Connell

(Name)

Park County Sheriff's Office

(Agency)

If the bearer of this document possesses a 40 Hour certificate pursuant to 29 CFR §1910.120, this certifies the above named has met the refresher training requirements of 29 CFR §1910.120(e)(8) and is hereby **RECERTIFIED** in Clandestine Laboratory Safety / HazWoper

Sponsored by
Rocky Mountain High Intensity Drug Trafficking Area
Colorado Regional Community Policing Institute

Caoimhin P. Connell 4/12/10
Caoimhin P. Connell, Instructor/Date
Glean HARDEY



Colorado Law Enforcement Officers' Association



This is to certify that

CAOIMHIN CONNELL

Completed **ARIDE (Advanced Roadside Impaired Driving Enforcement)**

hosted by **Loveland Police Department**

on **February 28 – March 1, 2011**

Tom Finelle
Tom Finelle, CLEOA President

M. A. [Signature]
ARIDE Instructor

State of Colorado



THE BOARD ON PEACE OFFICER STANDARDS AND TRAINING
HEREBY AWARDS THIS CERTIFICATE
AS INSPECTOR OF VEHICLE IDENTIFICATION NUMBERS
TO

CAOIMHIN PADRAIG CONNELL

August 27, 2008

Date

VIN INSP— **0952**

Number

For fulfilling the prescribed requirements as an Inspector of Vehicle Identification Numbers and as a peace officer in Colorado, pursuant to Title 42, Article 5, Section 206 Colorado Revised Statutes.

Bill Ritter Jr.

Governor

John W. Suthers

Attorney General, Board Chairperson

Certificate of Completion Intoxilyzer 9000 Operator Certification Course

*The Evidential Breath Alcohol Testing Program of the
Colorado Department of Public Health and Environment certifies that*

Caoimhin P Connell

User ID: **841645**

*has successfully completed the "Intoxilyzer 9000 Operator Certification Course"
to determine the alcohol concentration in breath specimens pursuant to the
State Board of Health Rules Pertaining to Testing for Alcohol and Other Drugs (5 CCR, 1005-2)
Training was provided by the Evidential Breath Alcohol Testing Program
of the Colorado Department of Public Health and Environment.*

February 21, 2013

Certificate Date

Jeffrey A. Groff

Jeffrey A. Groff, Program Manager
Evidential Breath Alcohol Testing Program



David A. Butcher

David A. Butcher, Director
Laboratory Services Division
Colorado Department of Public Health
and Environment

Certification expires 180 days from certificate date. Recertification must be per 5 CCR 1005-2.



Certificate of Achievement

awarded to:

Caoimhin P. Connell

Has successfully completed Methamphetamine Lab Cleanup Management and Supervision training in accordance with 29 CFR 1910.120 and State Regulations Pertaining to the Cleanup of Methamphetamine Laboratories (8Hrs.)

June 1st, 2005

Date

Signed

HAZMAT Plans & Programs, Inc. 30 S. Havana St. Suite 304F Aurora, Colorado 80012 (303) 360-9801
"Safety Plans, Programs and Training Tailored To The Needs Of Your Business"

CERTIFICATE OF COMPLETION

COLORADO LAW ENFORCEMENT ASSOCIATIONS TRAINING PROJECT

This Certifies That

Caoimhin Connell

Has Attended the

CLEAT 40-HOUR

Train the Trainer Course

Hosted by Breckenridge Police Department
August 14-18, 2006

Karen M. Renshaw, CAE
Executive Director
Colorado Association of Chiefs of Police



John L. Kammerzell
Executive Director
Police Officer Standard & Training



Donald E. Christensen
Executive Director
County Sheriffs of Colorado





SINCE 1973

This is to certify that

Caoimlin P. Connell

*Has completed a 24 hour training program in Vehicle Identification Number
Inspection*

Presented this 24th day of May, 2008

CATI President

VIN Inspector Training Coordinator

State of Colorado



THE BOARD ON PEACE OFFICER STANDARDS AND TRAINING
AWARDS THIS CERTIFICATE
TO

CAOIMHIN PADRAIG CONNELL

May 6, 2004

Date

B- 10670

Number

*For fulfilling the prescribed requirements for certification. This certificate expires three years from date of
issuance unless the certificate holder meets the requirements for continued certification as established by law
and the P.O.S.T. Board.*

Governor

Attorney General, Board Chairperson

*Rocky Mountain
High Intensity Drug Trafficking
Area*



Certifies that



Caoimhín Connell

has attended

16 hours of

MCTC / RMHIDTA Indoor Marijuana Grows

Centennial, CO

August 28-29, 2014

Training Manager, Rocky Mountain HIDTA

Director, Rocky Mountain HIDTA

CERTIFICATE OF TRAINING

THIS IS TO CERTIFY THAT

Caoimhín Connell

Has completed 4 hours of successful training for

The Hazards of Hash Oil Extraction

Held at IRIS Fire Investigations in Englewood, CO

on this 7th day of November, 2014

Robert K. Toth
IRIS Fire Investigations, President



COLORADO
Department of Public
Health & Environment

Dedicated to protecting and improving the health and environment of the people of Colorado

December 30, 2014

Caoimhin Connell
Forensic Applications Consulting Technologies Inc
185 Bounty Hunter Ln
Bailey, CO 80421

Consultant Interim Authorization Approval

Dear Caoimhin Connell:

The Hazardous Materials and Waste Management Division of the Colorado Department of Public Health and Environment (the Department) has reviewed the application for Consultant Interim Authorization and has determined the application to be complete and in compliance with 6 CCR 1014-3, Regulations Pertaining to the Cleanup of Methamphetamine-Affected Properties (the Regulations).

The Department approves the application for **Consultant Interim Authorization**. This interim authorization approval shall expire on June 15, 2015.

Assessment and sampling of methamphetamine-affected properties may only be conducted by Consultant Firms that have received interim authorization under Part 2, Section 3.2.4 of the Regulations. Therefore, this interim authorization may only be used to conduct assessment and sampling of methamphetamine-affected properties for a Consultant Firm that has received interim authorization approval from the Department.

Approved By: _____

Date: _____

12/30/2014





COLORADO
Department of Public
Health & Environment

Dedicated to protecting and improving the health and environment of the people of Colorado

December 30, 2014

Forensic Applications Consulting Technologies Inc
185 Bounty Hunters Ln
Bailey, CO80421

Consultant Firm Interim Authorization Approval

Dear Forensic Applications Consulting Technologies Inc:

The Hazardous Materials and Waste Management Division of the Colorado Department of Public Health and Environment (the Department) has reviewed the application for Consultant Firm Interim Authorization and has determined the application to be complete and in compliance with 6 CCR 1014-3, Regulations Pertaining to the Cleanup of Methamphetamine-Affected Properties (the Regulations).

The Department approves the application for **Consultant Firm Interim Authorization**. The firm shall only utilize individuals who have received interim authorization under Part 2, Section 3.2.1 of the Regulations to conduct assessment and sampling of methamphetamine-affected properties. This interim authorization approval shall expire on June 15, 2015.

The Regulations require submittal of electronic copies of reports to the Department. Electronic copies of reports should be submitted via email to cdphe_methlabdocuments@state.co.us. The words "report" or "report submittal" should be included in the email subject line, and the property address should be included in the body of the email.

Alternatively, compact disks with electronic copies of reports may be mailed to:

Colorado Department of Public Health and Environment
Hazardous Material and Waste Management Division
4300 Cherry Creek Drive South
Denver, CO 80246-1530
Attn: Colleen Brisnehan or Richard Mruz

Packages may also be hand delivered to the Department's mail room located in the northwest corner of Building B (700 South Ash Street).

Approved By: _____

Date: 12/30/2014

