

Emery County, Utah
Demolition Application

Property Owner:

- Name _____
- Address _____
- Site Address _____
- Phone numbers _____
- **Property Tax ID# _____

**Demolition State Licensed Company doing demolition work:

- Name _____
- Address _____
- Phone Numbers _____
- State Contractors License Numbers, Types and Dates of Expiration

Reason for Demolition: _____

Asbestos clearance and mitigation done by _____ on _____ 200__

Attach copy of asbestos clearance to application.

Attach to Application Proof of Disconnect of all Utilities: **Water Power Gas**

Blue Stakes Clearance: Date: _____ Reference # _____

All Refuse will be taken to the Emery County Landfill

**State Licensed Contractor's Signature _____ Date _____

Applicant's signature _____ Date _____

**Property Owner's signature _____ Date _____

Date to start _____

Approved _____ Date _____

All Demolitions, Destructive Salvage, & House moving are subject to Federal Reg. 40 CFR 61.145(a) and/or State Rules UAC R307-801-9 even when there is NO asbestos found in the structure.

**required



UTAH DIVISION OF AIR QUALITY
 150 N 1950 W
 P.O. Box 144820
 Salt Lake City, UT 84114-4820

Postmark Date: _____
 Initials: _____
 Fee Received: _____
 Check Number: _____

10 WORKING-DAY NOTIFICATION OF DEMOLITION - no asbestos removed, no intentional burning

1 Fee \$50 +\$25 for each 5,000 sq. ft. of floor space above 5,000 sq. ft. \$ _____

See fee calculator at www.deq.utah.gov/eqair/haps/asbestos/index.htm

2 Facility Name _____

Address _____
 City _____ County _____ Zip Code _____
 Part of Facility Involved,(e.g. floor #, room #, area etc.) _____
 Age of Facility _____ Size _____ # of Floors _____
 Present use _____ Prior Use _____

3 Facility Owner/Operator Name _____

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone Number _____

4 Demolition Contractor Name _____

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone _____

5 Dates of Demolition Start Date _____ Ending Date _____

6 Asbestos Inspection Information Date of Inspection _____

Name of Utah Certified Inspector _____ ID Number _____
 Name of Utah Certified Asbestos Company _____ ID Number _____
 Analytical Method used for asbestos analysis _____
 Is asbestos present? _____ Was it sampled or assumed? _____

7 Asbestos Containing Material to be left in the facility during demolition, (list types and amounts).

roofing _____ flooring _____ other _____

8 Description of procedures to be followed in the event that unexpected RACM is found or generated during the project. _____

attach additional sheets as necessary

9 I certify that the all the information in this notification is true and correct.
 Signature of Owner/Operator _____ Date _____
 Print name and title of Owner/Operator _____

OFFICIAL USE ONLY!
 Date Accepted _____ Date Rejected _____
 Acts #: _____ Reviewers Initials _____
 Rejection Comments: _____



UTAH DIVISION OF AIR QUALITY
 150 N 1950 W
 P.O. Box 144820
 Salt Lake City, UT 84114-4820

Postmark Date: _____
 initials: _____
 Fee Received: _____
 Check Number: _____

10 WORKING-DAY ASBESTOS NOTIFICATION

Please complete fully!! (original notification only)

1.a Type of Operation

Renovation Demolition Intentional Burning
 (all asbestos must be removed)

1.b Fee

\$ _____
 See Reverse

2 Facility Name

Address _____
 City _____ County _____ Zip Code _____
 Part of Facility Involved, (e.g., floor #, room #, area etc.) _____
 Age of Facility _____ Size _____ # of Floors _____
 Present Use _____ Prior Use _____

3 Facility Owner/Operator Name

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone Number _____

4 Asbestos Contractor Name

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone _____ ID Number _____

5 Demolition Contractor Name

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone number _____

6 Dates of Asbestos Removal

Prep Date _____ Start Date _____ Ending Date _____
 Working Days and Hours S M T W H F S from _____ am/pm to _____ am/pm
 Scheduled Dates of Demolition _____ Start Date _____ Ending Date _____

7 Asbestos Containing Material (ACM) to be removed, list amounts and units of measure

ceiling spray _____	floor tile/mastic _____
sheet vinyl _____	transite _____
pipe insulation _____	other _____
tank insulation _____	other _____
Total Surfacing (sq. ft.) _____	Total Pipe Covering (linear ft.) _____

(turn over and fill out reverse side)

8 I certify that the all the information in this notification is true and correct.

Signature of Owner/Operator _____ Date: _____
 Print name and title of Owner/Operator _____

OFFICIAL USE ONLY!

Date Accepted _____ Date Rejected _____
 Reviewers Initials _____ ACTS #: _____
 Rejection Comments: _____

9 Asbestos Inspection Information

Name of Utah Certified Inspector _____ ID Number _____
 Name of Utah Certified Asbestos Company _____ ID Number _____
 Analytical Method used for asbestos analysis _____
 Date of Inspection _____
 Is friable asbestos present? _____ Was it sampled or assumed? _____
 Is non-friable asbestos present? _____ Was it sampled or assumed? _____

10 ACM to be left in the facility during demolition, list amounts and units of measure.

Roofing _____ Other _____
 Flooring _____ Other _____

11 Person Trained in the Provisions of the NESHAP who will supervise asbestos project

Name _____ State Certification Number _____

12 Describe the scope of the project (e.g.. boiler replacement, seismic upgrade etc.)

13 Describe the engineering controls or rule options to be used to control asbestos.

14 Waste Transporter I

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone number _____

15 Waste transporter II

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone number _____

16 Waste Disposal Site

Address _____ City _____ State _____ Zip Code _____
 Contact Person _____ Phone number _____

17 Individual receiving signed waste shipment record.

Phone number _____

18 Description of procedures to be followed in the event that unexpected RACM is found or generated during the project.

Attach additional pages as necessary to complete this form. Incomplete notifications may not be accepted.

Fee Calculation		Abatement Unit Fee	Total Feet	Abatement Unit Fee	Total Feet	Total Fee
Asbestos Abatement						
Type of Structure	Base Fee		under 10,000(sq.ft plus lin. ft.)		over 10,000(sq.ft plus lin. ft.)	
Owner Occupied Res	\$40.00	+	X \$5.00 per 100 ft	+	X \$2.00 per 100 ft	
Other Structure	\$140.00	+	X \$5.00 per 100 ft	+	X \$2.00 per 100 ft	
Demolition						
	Base Fee		Floor space above 5000 sq. ft.			
	\$50.00	+	X \$25.00 per 5,000 sq. ft.			
						Total Fee \$

Submit Notifications to
 Utah Division of Air Quality
 150 N 1950 W
 P.O. Box 144820
 Salt Lake City, UT 84114-4820

A fee calculator is available at
www.deq.utah.gov/eqair/haps/asbestos/
 Fees calculations will be verified by DAQ
 Phone (801) 536-4000

UTAH DIVISION OF AIR QUALITY
REVISED NOTIFICATION of DEMOLITION or RENOVATION and ASBESTOS REMOVAL

OFFICE USE ONLY Date Received: _____	Postmark Date: _____	Initials: _____
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I. Type of Operation: [] Demolition [] Ordered Demolition [] Renovation [] Ordered Renovation

II. ORIGINAL NOTIFICATION DATE: _____ DAQH Approval # _____

III. Facility Description: Please Complete Fully!

A. Building Name: _____

B. Street Address: _____

C. City: _____ State: _____ Zip: _____

IV. A. Asbestos Removal Contractor: _____ ID# _____

Contact Person: _____ Telephone # _____

B. Demolition Contractor (if applicable): _____

Contact Person: _____ Telephone # _____

V. New Asbestos Removal Dates (Date ACM will be disturbed):

Start: _____ Complete: _____

A. Work days (S M T W T F S) B. Work Hours: _____ to _____

VI. New Dates of Demolition/Renovation: Start: _____ Complete: _____

VII. ADDITIONAL Regulated Asbestos Containing Material (RACM) to be Removed:

(Please include only additional material not included on original notification)

1. Pipes: _____ 2. Surface Area: _____ 3. Vol. ACM off Facility Component: _____

(Linear feet)

(Square Feet)

(Cubic Feet)

VIII. OTHER CHANGES OR COMMENTS TO ORIGINAL NOTIFICATION

IX. Date these changes were phoned to Division of Air Quality (536-4000): _____

Name of person contacted at DAQ: _____

X. I Certify that the Above Information is Correct.

(Signature of Owner/Operator)

(Date)

****Inspection Requirement****

When a structure or facility is to be demolished or renovated, an inspection, conducted by a certified individual and company, is required (UAC R307-801-9).

An asbestos survey report must be generated, and available onsite to all persons who have access to the work site. Furthermore, the asbestos survey must be maintained by the operator or owner for one year after the completion of the project. The asbestos survey report contains the following information:

1. a brief description of area;
2. a list of all suspect materials identified in affected area;
3. a list of samples collected from affected area;
4. a statement of the asbestos content of each sample or materials assumed to contain asbestos; and
5. a list of potential locations of suspect materials that were not accessible during initial inspection (UAC R307-801-10).

Contact the Utah Division of Air Quality at: (801) 536-4000

www.airquality.utah.gov/eqair/haps/asbestos/

Questions?

Contact the **Utah Division of Air Quality** at: **(801) 536-4000** for asbestos inspector and contractor lists, notification forms, and information about rules, or see our web page:

www.airquality.utah.gov/eqair/haps/asbestos/

Renovation or Demolition?

What you need to know before you start

Utah Division of Air Quality



**150 North 1950 West
PO Box 144820
Salt Lake City, Utah 84114-4820**

**Phone (801) 536-4000
Fax (801) 536-4099**

Are you Remodeling or Renovating?

You are subject to Federal Regulations 40 CFR 61.145(a) and/or Utah Administrative Code (UAC) R307-801-9 requiring inspection for asbestos.

Avoid asbestos exposure by workers and building occupants, penalties \$\$\$ and delays. Have your project inspected for asbestos by a State Certified asbestos inspector before commencing work.

It is illegal to improperly disturb some asbestos-containing materials.

Asbestos can be found in these common building materials: ceiling textures, vinyl floor coverings and mastic, boiler and pipe insulation, ceiling tile, roofing products, clapboard shingles, and many other building materials. Many of these materials can release harmful asbestos fibers and are regulated. A certified asbestos inspector can determine which materials contain asbestos and which are regulated.

For **ALL** Renovation Projects:

Structures/components to be disturbed ***must be Inspected for Asbestos.***

Buildings of ***any age*** may contain asbestos, even those newly built may have asbestos containing materials.

Asbestos containing materials that are regulated or may become regulated ***must be removed by a certified asbestos removal contractor*** before they are disturbed by renovation activities.

A ***written notification*** to Utah DAQ, payment of a notification fee and ***two week waiting period*** may be required before the removal of large amounts of regulated asbestos-containing materials.

Regulated asbestos-containing waste material ***must be disposed*** of at an approved asbestos waste disposal site.

Contact the Utah Division of Air Quality at: (801) 536-4000

www.airquality.utah.gov/eqair/haps/asbestos/

Demolitions, Destructive Salvage, House Moving

You are subject to Federal Regulations 40 CFR 61.145(a) and/or State Rules UAC R307-801-9 **even when there is NO asbestos found in the structure.**

Prior to Demolition:

Inspection: the building ***must be inspected for asbestos*** by a state certified asbestos inspector. Contact Utah DAQ for a current list of Asbestos Inspectors.

Notification of Demolition form must be submitted to the Utah Division of Air Quality, even if no asbestos was found during the inspection.

Asbestos Removal (if necessary) must be performed by a Utah Certified Asbestos Contractor.

Pay the Notification Fee (see our website for the fee calculator).

Wait Two Weeks: demolition cannot proceed until two weeks from the postmark or hand delivery date of the notification of demolition.

Violation of asbestos regulations can result in exposure to asbestos, monetary \$\$\$ penalties and project delays.