



P.O. Box 1, Pocopson PA 19366
Office: 610.793.2151 Fax: 610.793.1944
www.pocopson.org

POCOPSON TOWNSHIP DEMOLITION PERMIT APPLICATION PACKET IMPORTANT PLEASE READ!

The Permit Application Process will take approximately 15 working days. If any work commences before a permit is issued and paid for the permit fees will be doubled. A non-refundable fee of \$25.00 must be included when a demolition permit application is submitted. This charge is subtracted from the final permit fee that is due when the permit is picked up. The demolition permit application must be signed by the landowner/applicant. If the applicant is NOT the landowner a written statement indicating that the applicant will act as agent/representative is required.

Inspections are mandatory for all projects. Work shall not be done beyond the point indicated in each successive inspection without first obtaining the approval of the Building Inspector or appropriate Township Official. It is the duty of the permit holder to notify the Building Inspector or appropriate Township Official that such work is ready for inspection. If inspections are ignored the permit will be revoked.

All electrical inspections are performed by United Inspection Agency. Contact Len Warren at 610-399-5094 or fax to 610-399-5126 to schedule an electrical inspection.

**PERMIT MUST BE VISIBLE FROM THE STREET
UNTIL COMPLETION OF DEMOLITION**

Pocopson Township
P.O. Box 1
Pocopson, PA 19366

TELEPHONE:

610-793-9390 / 610-793-2151

FAX: 610-793-1944

STREET ADDRESS: 740 Denton
Hollow Rd., West Chester

**APPLICATION FOR
PLAN EXAMINATION
BUILDING AND ZONING
PERMIT**

IMPORTANT - Applicant to complete all items in sections: I, II, III, IV, and VIII

**I.
LOCATION
OF
BUILDING**

AT (LOCATION) _____ (NO.) _____ (STREET) _____ ZONING DISTRICT _____
BETWEEN _____ (CROSS STREET) _____ AND _____ (CROSS STREET) _____
TAX PARCEL NO. _____ LOT _____ LOT SIZE _____

II. TYPE AND COST OF BUILDING - All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT

- 1 ☐ New building
2 ☐ Addition (if residential, enter number of new housing units added, if any, in Part D, 13)
3 ☐ Alteration (See 2 above)
4 ☐ Repair, replacement
5 ☐ Wrecking (If multifamily residential, enter number of units in building in Part D, 13)
6 ☐ Foundation only
7 ☐ Roofing (strip or overlay)
8 ☐ Siding (type _____)

D. PROPOSED USE - For "Wrecking" most recent use

Residential

- 12 ☐ One family
13 ☐ Two or more family - Enter number of units -----> _____
14 ☐ Transient hotel, motel, or dormitory - Enter number of units -----> _____
15 ☐ Garage - Carport - Shed (size) _____
16 ☐ Fence (size and type) _____
17 ☐ Other - Specify _____

Nonresidential

- 18 ☐ Amusement, recreational
19 ☐ Church, other religious
20 ☐ Industrial
21 ☐ Parking garage
22 ☐ Service station, repair garage
23 ☐ Hospital, institutional
24 ☐ Office, bank, professional
25 ☐ Public Buildings
26 ☐ Signs
27 ☐ Stores, mercantile
28 ☐ Tanks, towers
29 ☐ Other - Specify _____

B. OWNERSHIP

- 9 Private (individual, corporation, nonprofit institution, etc.)
10 Public (Federal, State or local government)

C. COST

10. Cost of improvement \$
To be installed but not included in the above cost
a. Electrical
b. Plumbing
c. Mechanical
d. Other (elevator, etc.)

11. TOTAL COST OF IMPROVEMENT \$

(Omit cents)

C-2 FEE CHARGED & PAID

Building _____
Occupancy _____
Plumbing _____
Mechanical _____
Electrical _____
Zoning _____
Other _____
Total _____
Receipt No. _____

Nonresidential-Describe in detail proposed use of buildings, e.g., garage, office building industrial plant. If use of existing building is being changed, enter proposed use.

ALL IMPROVEMENTS MUST CONFORM TO BOCA BUILDING, PLUMBING, AND MECHANICAL CODE AND NATIONAL ELECTRIC CODE. ACT 222 ENERGY CONSERVATION REQUIREMENTS MUST BE MET.

III. A PRINCIPAL TYPE OF FRAME

- 30 ☐ Masonry (wall bearing)
31 ☐ Wood frame
32 ☐ Structural steel
33 ☐ Reinforced concrete
34 ☐ Other - Specify _____

B TYPE OF SEWAGE DISPOSAL

- 40 ☐ Public or private company
41 ☐ Private (septic tank, etc.)

D DIMENSIONS

48. Number of stories
49. Total square foot of improvement
50. Total square feet of floor area, all floors, based on exterior dimensions
51. Total land/lot area, sq. ft.

C TYPE OF WATER SUPPLY

- 42 ☐ Public or private company
43 ☐ Private (well, cistern)

E NUMBER OF OFF-STREET PARKING SPACES

52. Enclosed
53. Outdoors

PERMIT NO. _____

STREET _____

T.M.P. NO. _____

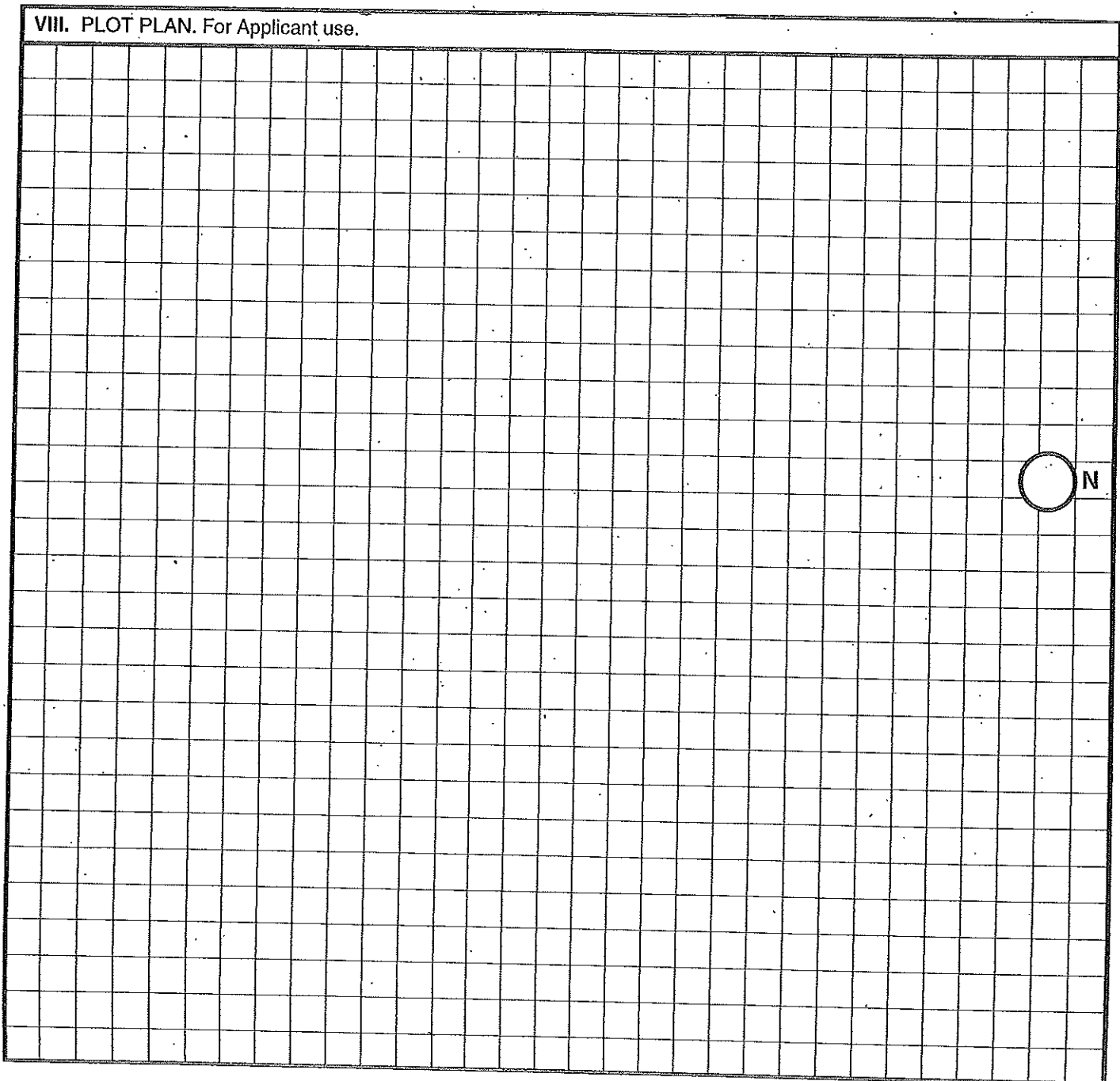
IV. IDENTIFICATION — To be completed by all applicants				
	Name	Mailing address — Number, street, city and State	ZIP Code	Tel. No.
1. Owner or Lessee				
2. Contractor			Builder's License No.	
3. Architect or Engineer				
Management Approval (where required)				
Signature of Contractor		Address		Application Date
Signature of Owner		Address		Date

DO NOT WRITE BELOW THIS LINE

V. ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS									
Permit or Approval	Check	Date Obtained	Number	By	Permit or Approval	Check	Date Obtained	Number	By
BROILER					PLUMBING				
CURB OR SIDEWALK CUT					ROOFING				
ELEVATOR					SEWER				
ELECTRICAL					SIGN OR BILLBOARD				
FURNACE					STREET GRADES				
GRADING					USE OF PUBLIC AREAS				
OIL BURNER					WRECKING				
OTHER _____					OTHER _____				

VI. VALIDATION	
Building and Zoning Permit Number _____ Building and Zoning Permit Issued _____ 19_____ Building and Zoning Permit Fees \$ _____ Certificate of Occupancy \$ _____	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> FOR DEPARTMENT USE ONLY Construction Type _____ Use Group _____ Fire Separation _____ Live Loading _____ Occupancy Load _____ </div> Building Approved by: _____ Plan Review Fee \$ _____
TITLE	

VII ZONING PLAN NOTES AND APPROVAL		
DISTRICT		
USE		
FRONT YARD		
SIDE YARD	SIDE YARD	
REAR YARD		
NOTES		
ZONING APPROVAL	DATE	FLOOD ZONE
	YES	NO

VIII. PLOT PLAN. For Applicant use.		
		

[illegible]



pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

POCOPSON TOWNSHIP
RECEIVED

JUL 05 2011

ASBESTOS PROGRAM FOR CONTRACTORS WORKING IN PENNSYLVANIA

The Pennsylvania asbestos program includes federal and state regulations to help protect the public from exposure to hazardous amounts of airborne asbestos. The following is a brief summary of the regulations. Information in this fact sheet does not supersede any federal, state or local requirements.

WHAT IS ASBESTOS?

Asbestos is a generic term used to describe a variety of natural mineral fibers. From the early 1930s until the 1970s, manufacturers added asbestos to products for strength and to provide heat insulation and fire resistance. Asbestos also resists corrosion and is a poor conductor of electricity. Because few products contained all of these properties, asbestos was widely used in the construction of homes, schools and other buildings.

HOW CAN PEOPLE BE EXPOSED TO ASBESTOS?

Most people are exposed to small amounts of asbestos in their daily lives. However, if materials containing asbestos are disturbed – for example sawed, scraped or sanded into a powder – asbestos fibers are more likely to become airborne and inhaled into the lungs.

HOW IS ASBESTOS REGULATED IN PENNSYLVANIA?

Because asbestos, in certain forms, has been determined to cause serious health problems, the Department of Environmental Protection (DEP) regulates the removal, collection, transportation and disposal of asbestos-containing materials (ACM). The DEP air quality program has adopted and enforces the federal Environmental Protection Agency (EPA) 40 CFR Part 61 Subpart M, the Asbestos National Emission Standard for Hazardous Air Pollutants (NESHAP) regulations, as amended on Nov. 20, 1990. Should a project be subject to the NESHAP regulations, a minimum ten-day notification of the project is required to be made to both EPA and DEP. The EPA and DEP do not regulate the removal of ACM from private residences unless the residence is an apartment with five or more units.

The Pennsylvania Department of Labor and Industry (PA DLI) enforces the Pennsylvania Asbestos Occupations Accreditation and Certification Act of 1990 (Act 194 and Act 161), which requires certification for the following asbestos occupations: contractor, inspector, management planner, project designer, supervisor and worker. PA DLI requires a five-day prior notification for friable asbestos on indoor projects at regulated facilities (including the EPA/DEP exempt private residence when the friable asbestos is disturbed by someone other than the homeowner). Call PA DLI at 717-772-3396 for more information regarding Act 194 and Act 161.

Contact the municipality where the project is located to find out if there are any local regulations.

WHAT ARE SOME IMPORTANT DEFINITIONS IN THE ASBESTOS NESHAP REGULATIONS?

- Friable ACM is material containing more than one percent asbestos that, when dry, can be crumbled, pulverized or reduced to a powder by hand pressure.
- Nonfriable ACM is material containing more than one percent asbestos that, when dry, **cannot** be crumbled, pulverized or reduced to a powder by hand pressure. It is divided into two categories:
 - Category I includes asbestos-containing packings, gaskets, resilient floor coverings or vinyl asbestos floor tile and asphalt roofing products.
 - Category II includes any other asbestos-containing material, except Category I nonfriable ACM, such as transite siding shingles, galbestos, concrete-type piping and other ACM concrete-type products.
- Regulated asbestos-containing materials (RACM) are: (a) friable ACM; (b) Category I nonfriable ACM that has passively become friable by water damage, fire damage or weathering; (c) Category I nonfriable ACM that will be or has been subjected to sanding, grinding, cutting, drilling or abrading; and (d) Category II nonfriable ACM that has a high probability of becoming or has become crumbled, pulverized or reduced to a powder in the course of demolition or renovation operations.
- Demolition – the wrecking or taking out of any load-supporting structural member of a facility together with any related handling operations or the intentional burning of any facility.

- Renovation – altering a facility or one or more facility components in any way, including the stripping or removal of RACM from a facility component.
- Facility – any institutional, commercial, public or industrial structure. A single residential building with four or fewer dwelling units is not a regulated facility under the NESHAP regulation unless it is part of an installation, which was previously subject to NESHAP regulations or its main use is not residential.
- Installation – any group of buildings or structures at a single demolition or renovation site that is under the control of the same owner or operator. An installation may consist of two or more residential structures.

WHAT DO I NEED TO KNOW BEFORE REMOVING ASBESTOS IN PENNSYLVANIA?

State regulations stipulate that it is illegal for anyone to engage in any asbestos occupation (worker, supervisor, project designer, inspector, management planner or contractor) without proper certification from the PA DLI. These requirements, along with a five-day notification prior to the start of any abatement or demolition project where ACM is present, are outlined in the Pennsylvania Asbestos Occupations Accreditation and Certification Act of 1990 (Acts 194 and 161). Call the PA DLI at 717-772-3396 for more information regarding these requirements.

The building must be thoroughly inspected for ACM prior to any renovation or demolition. If the amount of friable ACM that will be removed is more than 260 linear feet, 160 square feet or 35 cubic feet, the project falls under the federal NESHAP regulations. This requires that a notification be postmarked or hand delivered to DEP and EPA at least **TEN WORKING DAYS** prior to the start of the project. All demolitions of regulated facilities (as defined above) also require a ten-day notification to DEP and EPA, regardless of the presence of asbestos.

Additional regulations exist for demolition and renovation of any building containing ACM in Philadelphia and Allegheny Counties. In Philadelphia County, call 215-685-7576. For questions in Allegheny County, call 412-578-8133. It is important to contact the appropriate office if your project is located in either of these counties.

WHAT ARE THE PROCEDURES FOR NOTIFICATION?

Notification for projects in Pennsylvania are submitted on the "Asbestos Abatement and Demolition/Renovation Notification" form (revised 10/2002) (Web form revised 11/2007). A form may be obtained by contacting the DEP asbestos office at 717-787-9257 or by contacting the nearest DEP regional office listed below. The form also can be printed from the DEP Web site found at www.depweb.state.pa.us (choose DEP Programs (A-Z) and under the A heading choose Asbestos). Complete instructions are given with the form. The notice must be delivered by the U.S. Postal Service, commercial delivery service or hand delivery. **FACSIMILES ARE NOT ACCEPTABLE.**

WHAT IF I NEED MORE INFORMATION?

To obtain copies of the NESHAP regulations, the notification form or other information, please contact your regional DEP office:

Southeast Regional Office – 484-250-5920 for work in Bucks, Chester, Delaware and Montgomery Counties.

Northeast Regional Office – 570-826-2511 for work in Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne and Wyoming Counties.

Southcentral Regional Office – 717-705-4702 for work in Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry and York Counties.

Northcentral Regional Office – 570-327-3638 for work in Bradford, Cameron, Centre, Clearfield, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga and Union Counties.

Southwest Regional Office – 412-442-4000 for work in Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington and Westmoreland Counties.

Northwest Regional Office – 814-332-6940 for work in Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango and Warren Counties.

For work done in Philadelphia County, contact Air Management Services at 215-685-7576.

For work done in Allegheny County, contact Allegheny County Health Department at 412-578-8133.

For more information, visit www.depweb.state.pa.us, keyword: Asbestos.



pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

ASBESTOS ABATEMENT AND DEMOLITION/RENOVATION NOTIFICATION FORM

For Official Use Only

Date Received 1

Date Received 2

Postmark Date: _____

Project ID#: _____

Permit #: _____

Other #: _____

Inspector: _____

NOTICE: This is not a valid asbestos abatement notification for the purposes of the Asbestos Occupations Accreditation and Certification Act unless individuals and contractors have met the certification requirements as set forth in the Asbestos Occupations Accreditation and Certification Act, Act of 1990, P.L. 805, No. 194 (63 P.S. Sections 2101-2112).

REFER TO THE ATTACHED INSTRUCTIONS FOR INFORMATION AND REQUIREMENTS.

1.	TYPE OF NOTIFICATION (check one): <input type="checkbox"/> Revision (highlight here, and changes) <input type="checkbox"/> Postponement <input type="checkbox"/> Initial <input type="checkbox"/> Phase of Annual Notification <input type="checkbox"/> Cancellation <input type="checkbox"/> Annual Notification Date of Initial Notification or, if previously revised, date of last revision: _____
2.	PROJECT LOCATION (check one): <input type="checkbox"/> Allegheny County <input type="checkbox"/> City of Philadelphia <input type="checkbox"/> Other Location in PA (specify county): _____
3.	For Allegheny County and City of Philadelphia projects only: A. Does this project require a permit? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes is checked, a permit application must be submitted along with this notification and approved prior to the start of the project.) B. For City of Philadelphia projects requiring a permit: Asbestos project inspector: _____ Certification #: _____ Company name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____
4.	WILL ALTERNATIVE METHODS TO ANY OF THE APPLICABLE REGULATIONS BE USED? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes is checked, approval must be obtained prior to the start of the project. Please contact the appropriate DEP regional office or local government agency (see reverse of Instruction Sheet for contact list).)
5.	TYPE OF OPERATION (check one): <input type="checkbox"/> Demolition <input type="checkbox"/> Ordered Demolition <input type="checkbox"/> Abatement prior to Demolition <input type="checkbox"/> Renovation <input type="checkbox"/> Emergency Renovation
6.	FACILITY DESCRIPTION: Job No.: _____ (see instructions) Facility Name: _____ Street/Rural Address: _____ City: _____ State: PA Zip Code: _____ Present use: _____ Prior use: _____ Will the facility be occupied during the abatement activity? <input type="checkbox"/> Yes <input type="checkbox"/> No Facility size in square feet: _____ # of floors: _____ Age in years: _____
7.	ABATEMENT CONTRACTOR: Company name: _____ Allegheny County or City of Philadelphia License # (if applicable): _____ Street/Rural/POB Address: _____ City: _____ State: _____ Zip: _____ Contact: _____ Telephone No. (between 8:00 & 4:30): _____

8. DEMOLITION CONTRACTOR: Company name: _____ Street/Rural/POB Address: _____ City: _____ State: _____ Zip: _____ Contact: _____ Telephone No. (between 8:00 & 4:30): _____						
9. FACILITY OWNER: Owner name: _____ Street/Rural/POB Address: _____ City: _____ State: _____ Zip: _____ Contact: _____ Telephone No. (between 8:00 & 4:30): _____						
10. FACILITY INSPECTION (required for renovation and demolition projects): Building inspector: _____ Certification # _____ Date of inspection: _____ Is any material assumed to be asbestos? <input type="checkbox"/> Yes <input type="checkbox"/> No Procedure, including analytical method, if appropriate, used to detect the presence of asbestos material: _____						
<input type="checkbox"/> Building is ID and in danger of collapse. An asbestos investigator will be on site during demolition. (Philadelphia only)						
11. IS ANY TYPE OF ASBESTOS PRESENT <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please list in #12						
12. TYPE OF ACM, DESCRIPTION & LOCATION OF MATERIAL, APPROXIMATE AMOUNT OF ACM, TYPE OF ABATEMENT AND FINAL AIR CLEARANCE METHOD. PROVIDE INFORMATION IN THE SPACES BELOW, THEN CONTINUE ON ANOTHER SHEET, IF NECESSARY, USING THE SAME FORMAT.						
Code *	Description of material	Location of material (room/floor/area)	Amount of ACM	Code **	Code ***	Code ****
Code * <u>Type of ACM</u> FRI - Friable ACM NF1 - Cat I nonfriable ACM NF2 - Cat II nonfriable ACM (Note: Allegheny County treats all ACM as friable)		Code ** <u>Units</u> LF - Linear ft. SF - Square ft. CF - Cubic ft.		Code *** <u>Type of abatement</u> REM - Removal CAP - Encapsulation CLO - Enclosure NON - None		Code **** <u>Final Clearance</u> PCM - Phase contrast microscopy TEM - Transmission electron microscopy
13. Is this project regulated by NESHAP <input type="checkbox"/> Yes <input type="checkbox"/> No A project that includes the demolition of any defined "facility" is regulated by NESHAP. A renovation project is also regulated by NESHAP when the amounts of friable ACM, or ACM that may be rendered friable, are as follows: 260 LF or 160 SF or 35 CF.						

14. OPERATION SCHEDULE(S) (as applicable)

- A. Asbestos abatement: Start Date: _____ Completion Date: _____
 Daily hours of operation: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm
 Days of week (check) ☐ Mo ☐ Tu ☐ We ☐ Th ☐ Fr ☐ Sa ☐ Su
- B. Demolition: Start Date: _____ Completion Date: _____
 Daily hours of operation: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm
 Days of week (check) ☐ Mo ☐ Tu ☐ We ☐ Th ☐ Fr ☐ Sa ☐ Su
- C. Renovation: Start Date: _____ Completion Date: _____
 Daily hours of operation: _____ ☐ am ☐ pm to _____ ☐ am ☐ pm
 Days of week (check) ☐ Mo ☐ Tu ☐ We ☐ Th ☐ Fr ☐ Sa ☐ Su

COMMENTS:

15. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK:

16. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO REMOVE ACM AND TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

17. WASTE TRANSPORTER(S)

- A. Transporter #1 name: _____
 Street/Rural Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____ Telephone: _____
- B. Transporter #2 name: _____
 Street/Rural Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____ Telephone: _____

18.	WASTE DISPOSAL SITE(S): (any asbestos containing material)	
A.	Landfill name: _____	DEP permit #: _____
	Street/Rural Address: _____	
	City: _____	State: _____ Zip: _____
	Contact: _____	Telephone: _____
B.	Landfill name: _____	DEP permit #: _____
	Street/Rural Address: _____	
	City: _____	State: _____ Zip: _____
	Contact: _____	Telephone: _____
19.	AIR MONITORING FIRM(S)	
A.	Company name/individual: _____	
	Street/Rural Address: _____	
	City: _____	State: _____ Zip: _____
	Contact: _____	Telephone: _____
B.	Final clearance firm: (if different than 19A) _____	
	Street/Rural Address: _____	
	City: _____	State: _____ Zip: _____
	Contact: _____	Telephone: _____
	Final clearance firm was hired by (check one) <input type="checkbox"/> Contractor <input type="checkbox"/> Owner	
	<input type="checkbox"/> Other Explain _____	
20.	AIR SAMPLE FIRM(S) (City of Philadelphia projects only)	
A.	PCM company name/individual: _____	Certification #: _____
	Street/Rural Address: _____	
	City: _____	State: _____ Zip: _____
	Contact: _____	Telephone: _____
B.	TEM company name: _____	Certification #: _____
	Street/Rural Address: _____	
	City: _____	State: _____ Zip: _____
	Contact: _____	Telephone: _____
21.	FOR EMERGENCY RENOVATIONS:	
	Date of emergency (mm/dd/yy): _____	Hour of emergency: _____ <input type="checkbox"/> am <input type="checkbox"/> pm
	Description of the sudden, unexpected event:	

	Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden as a consequence of complying with the 10 working day notification requirement:	

22. FOR ORDERED DEMOLITIONS (attach copy of order):

Government agency that ordered: _____
 Name of individual who ordered: _____ Title: _____
 Date of order (mm/dd/yy): _____ Date ordered to begin (mm/dd/yy): _____

23. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:

24. PENNSYLVANIA CERTIFICATIONS/LICENSES:

Project designer: _____ Certification #: _____
 Contractor (Individual): _____ Certification #: _____
 Supervisor: _____ Certification #: _____
 Contractor (Firm) _____ Certification #: _____

***** SIGN BOTH STATEMENTS *****

25. I HEREBY CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF 40 CFR PART 61 SUBPART M (if applicable) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING ALL WORKING HOURS, AND I CERTIFY THAT ALL WORK WILL BE DONE IN ACCORDANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL AGENCY RULES AND REGULATIONS.

 (Original Signature of Owner/Operator) (Date)

Printed Name of Owner/Operator: _____ Title: _____

26. I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS AND THE INFORMATION CONTAINED IN THIS NOTIFICATION FORM ARE TRUE. THIS CERTIFICATION IS MADE SUBJECT TO THE PENALTIES SET FORTH IN 18 PA C.S. §4904 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES.

 (Original Signature of Owner/Operator) (Date)

Printed Name of Owner/Operator: _____ Title: _____

FOR OFFICIAL USE ONLY

JUL 05 2011

2700-FM-AQ0021 Rev. 11/2007
Instructionspennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTIONCOMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR QUALITY

ASBESTOS ABATEMENT AND DEMOLITION/RENOVATION NOTIFICATION FORM

Complete all applicable sections of the notification. Fax copies are not accepted, as the notification must be certified with an original signature. To avoid a violation by failure to report, it would be prudent to submit a notification regardless of friability of materials. This form is used to satisfy the notification requirements of the following agencies:

- PA Department of Environmental Protection
- PA Department of Labor and Industry
- Allegheny County Health Department
- City of Philadelphia Department of Public Health
- US Environmental Protection Agency

Questions relative to specific filing requirements and enforcement regulations should be directed to the governing agency. Addresses and phone numbers are listed on the reverse. **Do not mail original notifications to the Department of Labor and Industry.**

Special Notations:

- All REVISIONS to a previous notification should be highlighted
- Item #5 - Check the box that best describes the entire project
- Item #6 - The "Job No." portion of this item is provided for those contractors who assign a unique job # to their projects
- Item #12 - Please provide the information in the format requested
- If additional space is needed for any descriptive text, please continue on a blank sheet, and attach

For projects in all areas except Allegheny County and the City of Philadelphia, this Notification and subsequent revisions (one original only, no copies) must be submitted to the following address.

Regular Mail
ASBESTOS NOTIFICATION
DEP BUREAU OF AIR QUALITY
PO BOX 8468
HARRISBURG, PA 17105-8468

Overnight/Express Mail/Hand Delivery
ASBESTOS NOTIFICATION
DEP BUREAU OF AIR QUALITY
400 MARKET STREET
HARRISBURG, PA 17101

For projects in Allegheny County or the City of Philadelphia, this form must be submitted to the appropriate address, directly following. Allegheny County requires two copies, the City of Philadelphia, three. If this project requires a permit application, it must be approved prior to the start of the project, and 2 copies must be included with the notification. A copy of the facility inspection survey must also be included for all demolition projects. Do not send these documents directly to Harrisburg.

Allegheny County Health Department
Air Quality Program
Building 7
301 39th Street
Pittsburgh, PA 15201-1891
Attn: Asbestos Abatement Permitting

City of Philadelphia
Department of Public Health
Air Management Services
Asbestos Control Unit
321 University Avenue
Philadelphia, PA 19104-4597

Allegheny County - A permit is required if the project involves at least 260 linear feet or 160 square feet of any asbestos containing material. For Item #10, the survey must be included for demolition projects. Item #25 should be signed by the Contractor. Item #26 should be signed by the Facility Owner. Information can be obtained by calling 412-578-8133.

City of Philadelphia - A permit is required if the project involves 80 or more square feet or 40 or more linear feet of friable asbestos containing material and does not involve an exempted private residence. Information can be obtained by calling 215-685-7576.

If this project is regulated by the Asbestos NESHAP, a photocopy of this notification must be sent to EPA Region III at the address directly following. EPA's telephone number is 215-814-2164/215-814-2135.

Asbestos NESHAP Coordinator (3WC32)
US EPA Region III
1650 Arch Street
Philadelphia, PA 19103-2029

Questions regarding completion of the notification form should be directed to 717-772-3993/717-787-9257 or the appropriate enforcement agency listed on the reverse.

REMINDER: Notifications must contain original signatures for Items 25 and 26 or they will be returned to the sender, unprocessed. If a notification is returned for original signature, the ten-day reporting period will begin with the postmark date of the resubmitted notification with original signature.

-- SEE REVERSE FOR LIST OF CONTACTS --

STATE AND LOCAL AGENCY CONTACTS

City of Philadelphia

City of Philadelphia
Department of Public Health
Air Management Services
Asbestos Control Unit
321 University Avenue
Philadelphia, PA 19104-4597
215-685-7576

Allegheny County

Allegheny County Health Department
Air Quality Program
Building 7
301 39th Street
Pittsburgh, PA 15201-1891
412-578-8133

All Other Counties

DEP Contact

Bradford, Cameron, Centre, Clearfield, Clinton,
Columbia, Lycoming, Montour, Northumberland,
Potter, Snyder, Sullivan, Tioga, and Union

DEP Northcentral Region
208 West 3rd Street - Suite 101
Williamsport, PA 17701-6448
570-327-3638

Carbon, Lackawanna, Lehigh, Luzerne, Monroe,
Northampton, Pike, Schuylkill, Susquehanna,
Wayne, and Wyoming

DEP Northeast Region
2 Public Square
Wilkes-Barre, PA 18711-0790
570-826-2531

Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson,
Lawrence, McKean, Mercer, Venango, and Warren

DEP Northwest Region
230 Chestnut Street
Meadville, PA 16335-3481
814-332-6940

Adams, Bedford, Berks, Blair, Cumberland, Dauphin,
Franklin, Fulton, Huntingdon, Juniata, Lancaster,
Lebanon, Mifflin, Perry, and York

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Norristown, PA 19401
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Armstrong, Beaver, Cambria, Fayette, Greene,
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Labor & Industry Contact

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