CITY OF BLOOMINGDALE

Demolition Permit Application

Page 1 of 1

Updated **JUNE 2025**

NOTICE TO APPLICANTS

All Utilities are required to be turned off before permit can be issued. An Asbestos Inspection must be done and the Report must be turned in with the completed application. Permit Holder agrees to hold the City of Bloomingdale harmless on any construction covered by the permit resulting in construction of wetlands. The permit becomes null and void if work or construction authorized is not commenced with a six-month period or if construction or work is suspended or abandoned for a period of six months at time after work is commenced.

OFFICE USE ONLY

Permit Number: _____ PIN: _____

Special Conditions: _____

Flood Zone: _____ Plan Review Fee: _____ Permit Fee: _____

Reviewed by: _____ Date: _____

General Information

_____
Project Address

_____
Owner Name Owner Mailing Address

_____
Owner Phone Owner Email

_____
Contractor Name Contractor Mailing Address

_____
Contractor Phone Contractor Email

Structure Information

☐ Residential ☐ Full Demolition of Structure # of Stories: _____ Square Footage: _____

☐ Commercial ☐ Partial Demolition of Structure Is Demolition ordered by the City? ☐ Yes ☐ No

Water Provider: ☐ City ☐ County ☐ Private Utility ☐ Community Well ☐ Private Well

Sewer Provider: ☐ City ☐ Septic

_____ _____
Describe Work $ Valuation of Work

It is understood and agreed by the undersigned owner or agent that the approval of this application does not constitute a privilege to violate the building codes, zoning ordinance, or other ordinances of The City of Bloomingdale. The owner is listed above will be held responsible for insuring that all permits have been obtained and that all required inspections have been made. The owner will be held legally liable for any violations which may occur with or without his or her knowledge. Undersigned has received the information regarding Asbestos abatement and EPD requirements.

_____
Applicant Name Applicant Signature Date

Property Owner Authorization (Building)

Updated **NOV 2024**

Authorization

Completion of this form is required for all of the following applications:

☐ Building Permit – Commercial ☐ Building Permit – Misc. ☐ Demo Permit ☐ Sign Permit - Permanent

I authorize the person named below to act as Applicant in pursuit of the use(s) checked above.

Applicant/Agent Name | Email | Phone

Applicant/Agent Address

I swear that I am the owner of the property, which is the subject matter of the attached application, as shown in the records of Chatham County, Georgia, and that the information contained in this authorization is true and correct to the best of my knowledge and belief.

Property Address

Owner Name | Owner Signature | Date

Notary Public

Subscribed and Sworn This Day Of

Notary Name | Notary Signature | Commission Expiration

Seal

DEMOLITION GUIDELINES

DEMOLITION IS CONSIDERED EXCAVATION - CALL BEFORE YOU DIG/ 1-877-427-4321

1. A Georgia Project Notification Form for Asbestos Renovation, Encapsulation or Demolition MUST be submitted to EPD at the address listed on page one of the Notification Form and a copy submitted to City Hall.

2. An application for a demolition permit must be completed and turned into City Hall

3. All utility services must be disconnected

- Electrical service must be disconnected and power lines removed at the street
  Residential Customer Service/ l-888-660-5890/24hrsndays
- Gas lines must be disconnected and killed at the street
  Atlanta Gas Customer Service/ 1-800-427-5463
- Water Meters should be marked and protected
- Grinder Pump tanks should be marked and protected

Acknowledgment of receipt:

_____ _____

Contractor/Owner **Date**

Sworn to and subscribed before me on this day of_____, 20

_____ _____

Notary Public **Date**

GEORGIA PROJECT NOTIFICATION FORM FOR ASBESTOS RENOVATION, ENCAPSULATION, OR DEMOLITION

ARE YOU SUBMITTING AN ADVANCE NOTIFICATION? **EPD *STRONGLY DISCOURAGES* SUBMITTAL OF ADVANCE NOTIFICATIONS,** BUT IF IT IS ENTIRELY UNAVOIDABLE, CHECK (☑) THE BOX BELOW AND FAX THE ***FIRST PAGE ONLY*** OF THIS FORM TO **(404) 362-2563**. WHEN SUBMITTING AN ADVANCE NOTIFICATION, YOU ARE STILL REQUIRED TO COMPLETE THIS FORM IN ITS ENTIRETY AND SUBMIT IT ***VIA MAIL*** TO THE ADDRESS PROVIDED. **EPD NO LONGER ACCEPTS 'FAX ONLY' DOCUMENTS!!**

PLEASE ACCEPT THIS FORM AS ADVANCE NOTIFICATION OF THE PROJECT DESCRIBED BELOW: ☐

PERSON SUBMITTING ADVANCE NOTIFICATION:_____ **CONTACT PHONE:**_____

FAILURE TO SUBMIT ACCURATE AND COMPLETE FORMS WITHIN THE REQUIRED TIME FRAME AND AS INSTRUCTED MAY RESULT IN ENFORCEMENT ACTIVITY BY EPD! INCOMPLETE OR INACCURATE FORMS WILL BE REJECTED AND RETURNED. USE AN ATTACHMENT TO PROVIDE ADDITIONAL INFORMATION FOR ANY SECTION WHEN NEEDED TO PROVIDE COMPLETE DETAILS.

DO NOT LEAVE ANY SECTION BLANK – INSERT UNKNOWN OR N/A IF NEEDED!

FOR PROJECTS WHERE FEES ARE DUE:	**FOR PROJECTS WHERE FEES ARE NOT DUE:**
EPD ASBESTOS FEES LOCKBOX POST OFFICE BOX 101173 ATLANTA, GEORGIA 30392 (SEE SECTION 6 FOR FEE CALCULATION INSTRUCTIONS)	EPD ASBESTOS PROGRAM ATTN: ASBESTOS NOTIFICATIONS 4244 INTERNATIONAL PARKWAY, SUITE 104 ATLANTA, GEORGIA 30334

SECTION 1A - TYPE OF NOTICE (USE THE APPROPRIATE CHECKBOX TO INDICATE THE TYPE OF NOTICE YOU ARE SUBMITTING)

☐ **ORIGINAL INITIAL** ☐ **ANNUAL BLANKET ($1,000.00 FEE DUE NOW)** ☐ **CANCELLATION**

☐ **REVISION** (IF REVISION, REVISION #_____) REVISION NOTE: CHECK THE REVISION BOX IN THE SECTION BEING REVISED AND INSERT THE CORRECTED INFORMATION WHERE APPROPRIATE

SECTION 1B - TYPE OF PROJECT **CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL** ☐

☐ RENOVATION/ABATEMENT ***ONLY*** ☐ RENOVATION/ABATEMENT ***PRIOR TO*** DEMOLITION ☐ ENCAPSULATION
☐ DEMOLITION ONLY ☐ JOINT DEMOLITION/RENOVATION ☐ ORDERED DEMOLITION

☐ EMERGENCY (SEE ASBESTOS RULES FOR DEFINITION OF EMERGENCY) ☐ COURTESY (FOR NON-FRIABLE PROJECTS OR UNDER TRIGGER QUANTITY PROJECTS ***ONLY!***!!)

SECTION 2 – SITE INFORMATION **CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL** ☐

PROJECT NAME:		
PROJECT ADDRESS:		
PROJECT CITY:	ZIP:	COUNTY:
NEAREST MAJOR INTERSECTION:		
BLDG SIZE IN SQ. FT:	AGE OF BUILDING IN YEARS:	NUMBER OF FLOORS IN BUILDING:
SPECIFIC LOCATION IN BUILDING OF ASBESTOS BEING REMOVED:		

SECTION 3A – ABATEMENT CONTRACTOR **CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL** ☐

ASBESTOS REMOVAL CONTRACTOR:				
CONTRACTOR STREET ADDRESS:			COMPANY CERTIFICATE #:	
CITY:	STATE:	ZIP:	PHONE:	FAX:
LICENSED AGENT:		AGENT'S ID:	EXPIRES:	CELL PHONE:

3b Other Contractor **CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL** ☐

GENERAL/SUB/DEMOLITION CONTRACTOR:			JOB CONTRACTED:	
OTHER CONTRACTOR STREET ADDRESS:				
CITY:	STATE:	ZIP:	PHONE:	FAX:

SECTION 4 – ACM INFORMATION **CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL** ☐

IS ASBESTOS PRESENT? ☐ YES ☐ NO ☐ UNKNOWN	☐ FRIABLE ☐ NON-FRIABLE ☐ BOTH	
DID AN AHERA ACCREDITED INSPECTOR INSPECT THIS SITE? ☐ YES ☐ NO ☐ ASSUMED ASBESTOS		
INSPECTOR NAME:	INSPECTOR PHONE:	
ACCREDITATION COURSE:	CERTIFICATE NUMBER:	EXPIRES:

SECTION 5 – WORK SCHEDULES ***(10 WORKING DAY ADVANCE NOTIFICATION REQUIRED FOR NON-EMERGENCY NOTIFICATIONS!!!)***
CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL ☐

ABATEMENT START DATE	**ABATEMENT END DATE**	**WORK DAYS (MON-SUN)**	**WORK HOURS (EX : 7-4)**
DEMOLITION START DATE	**DEMOLITION END DATE**	**WORK DAYS (MON-SUN)**	**WORK HOURS (EX : 7-4)**

SECTION 6 – ACM AMOUNTS, TYPE CODES, AND FEE CALCULATION

CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL ☐

FIRST, LOCATE THE MATERIAL TO BE REMOVED IN **COLUMN A**. **COLUMN B** SHOWS THE USUAL NESHAP CATEGORY FOR THE MATERIAL. **COLUMN C** SHOWS THE CATEGORY THE MATERIAL WILL LIKELY BECOME DURING ABATEMENT, AND THAT **IS THE CODE THAT SHOULD BE USED FOR COMPLETING THIS FORM.** NOW, ENTER THE SQ. FT AND/OR L.F. AMOUNTS OF ACM TO BE ABATED DURING THIS PROJECT UNDER THE CORRECT HEADING ACCORDING TO TYPE IN **COLUMN D, E, AND/OR F**. THEN, LOCATE THE CORRESPONDING TYPE CODE(S) FOR THE MATERIAL(S) IN **COLUMN G** AND ENTER THE CODES IN THE SPACES PROVIDED BEFORE PROCEEDING TO THE FEE CALCULATION SECTION.

COL. A	COL. B			COL. C	SF OR LF AMOUNT TO BE ABATED DURING THIS PROJECT			COL. G1
ACM TYPE	USUAL NESHAP CATEGORY			WILL LIKELY BECOME WHEN ABATED	COL. D CAT 1	COL. E CAT 2	COL. F RACM	ACM TYPE CODE
	CAT 1	CAT 2	RACM					
ASBESTOS ASPHALT SHINGLES	✓		✓	1				AAS
ASBESTOS CEMENT (TRANSITE) PANELS		✓	✓	2 OR RACM				ACP
ASBESTOS CEMENT (TRANSITE) ROOFING		✓	✓	RACM				ACR
ASBESTOS CEMENT (TRANSITE) SIDING SHINGLES		✓	✓	RACM				ACS
ASBESTOS FLASHING	✓		✓	1				AF
ASBESTOS GASKET	✓		✓	1 & RACM				AG
BOILER INSULATION			✓	RACM				BI
BUILT-UP ROOFING	✓		✓	1				BUR
COVE (BASEBOARD) MOLDING MASTIC	✓			1				CM
CEILING PLASTER			✓	RACM				CP
CEILING TILE			✓	RACM				CT
DUCT SEAM MASTIC	✓		✓	1				DSM
DUCT VIBRATION DAMPENERS	✓		✓	1				DVD
EXTERIOR (OUTSIDE) DUCT INSULATION	✓		✓	RACM				EDI
FELT DUCT TAPE			✓	RACM				FDT
FLOOR MASTIC	✓		✓	1				FM
FIREPROOFING			✓	RACM				FP
FIREPROOFING AND OVERSPRAY			✓	RACM				FPO
FLOOR TILE	✓		✓	1				FT
FLOOR TILE AND MASTIC	✓		✓	1 OR RACM				FTM
INTERIOR (INSIDE) DUCT INSULATION	✓		✓	RACM				IDI
JOINT COMPOUND ONLY			✓	RACM				JC
LIGHT WEIGHT CONCRETE		✓	✓	2 OR RACM				LWC
OTHER: FLOOR LEVELING COMPOUND, CAULKING, ETC.)		✓	✓	1 OR RACM				OTR
PIPE INSULATION STRAIGHT RUNS			✓	RACM				PI
PIPE INSULATION ELBOWS AND FITTINGS			✓	RACM				PIE
RESILIENT FLOOR COVERINGS (SHEET FLOORING; LINOLEUM)	✓		✓	1 OR RACM				RFC
ROOF MASTICS AND COATINGS	✓		✓	1				RMC
ROOFING SILVER COATING	✓		✓	1 OR RACM				RSC
TEXTURED CEILING			✓	RACM				TC
TEXTURED CEILING PLASTER			✓	RACM				TCP
TANK INSULATION			✓	RACM				TI
WALL BOARD AND JOINT COMPOUND			✓	RACM				WBJC
WINDOW GLAZING	✓		✓	1 OR RACM				WG
WALL PLASTER			✓	RACM				WP

COL. G2: Enter the ACM Type Codes From **Col. G** 1 For Each Category Below.

CAT 1: _____

CAT 2: _____

RACM: _____

COL. D TOTAL	COL. E TOTAL	COL. F TOTAL	
_____	_____	_____	

CALCULATING FEES – Now, Check The Box Next To The Project Type To Indicate Whether This Is A Residential Or Non-Residential Project.

BOX H. IS THIS A RESIDENTIAL PROJECT? ☐ YES (USE TOTAL FROM **COL. F** TO COMPLETE THIS SECTION)

RESIDENTIAL FEE SCHEDULE: 10¢ PER LF/SF OF FRIABLE ACM SUBJECT TO A *MINIMUM FEE OF $25 AND A MAXIMUM FEE OF $50 PER RESIDENCE*	RESIDENTIAL PROJECT COL. F TOTAL H (a)._____SF/LF	X .10 EQUALS	TOTAL FEES DUE AND PAYABLE NOW H (b). $_____ (NOT TO BE LESS THAN $25 OR MORE THAN $50)

BOX I. IS THIS A NON – RESIDENTIAL PROJECT? ☐ YES (USE TOTAL FROM **COL. F.** TO COMPLETE THIS SECTION)

NON-RESIDENTIAL FEE SCHEDULE: 10¢ PER LF/SF OF FRIABLE ACM SUBJECT TO A *MINIMUM FEE OF $25 AND A MAXIMUM FEE OF $1,000 PER FACILITY*	NON-RESIDENTIAL PROJECT COL. F TOTAL I(a)._____SF/LF	X .10 EQUALS	TOTAL FEES DUE AND PAYABLE NOW I (b). $_____ (NOT TO BE LESS THAN $25 OR MORE THAN $1,000)

Finally, Enter The Check Number For The Fee Payment You Are Submitting, Or Explain **WHY** The Fee Is Not Being Submitted And **WHEN** And By **WHOM** It Will Be Sent

CHECK NUMBER _____ **FOR THE AMOUNT SHOWN IN THE TOTAL FEES DUE COLUMN (S) ABOVE HAS BEEN SENT: ☐ YES**

IF NOT, WHY NOT? _____

SECTION 7 - WASTE TRANSPORTER, DISPOSAL SITE, AND BUILDING OWNER INFORMATION CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL ☐				
WASTE TRANSPORTER				
WASTE TRANSPORTER NAME		TRANSPORTER CONTACT PERSON:		
TRANSPORTER'S MAILING ADDRESS:				
CITY:	STATE:	ZIP:	PHONE:	FAX:
DISPOSAL SITE				
DISPOSAL SITE NAME:		DISPOSAL SITE COUNTY:		
DISPOSAL SITE STREET ADDRESS:				
CITY:	STATE:	ZIP:	PHONE:	FAX:
PROJECT OWNER				
PROJECT OWNER'S NAME:		OWNER'S REPRESENTATIVE:		
OWNER'S STREET ADDRESS:				
OWNER'S MAILING ADDRESS (IF DIFFERENT):				
CITY:	STATE:	ZIP:	PHONE:	FAX:

SECTION 8 - WORK METHODS: METHOD OF DEMOLITION AND/OR RENOVATION ACTIVITY (DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED) CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL ☐

SECTION 9 – ADDITIONAL PROJECT INFORMATION	CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL ☐		
WILL ASBESTOS REMAIN IN THE PROJECT AREA?	☐ NO	☐ YES	☐ UNKNOWN
EXPLAIN 'YES' OR 'UNKNOWN':			
IF NO ASBESTOS IS PRESENT, WAS THIS PROJECT PREVIOUSLY ABATED?	☐ NO	☐ YES	☐ UNKNOWN
PRIOR ABATEMENT COMPANY:	YEAR ABATED:		
THAT COMPANY CONTACT PERSON:	PHONE:		

CERTIFICATION OF INFORMATION AND ACKNOWLEDGEMENT
CHECK IF SECTION IS BEING REVISED FROM A PREVIOUS SUBMITTAL ☐

I THE UNDERSIGNED CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF FEDERAL REGULATIONS (NESHAP/40 CFR PART 61 SUBPART M) WILL BE ON THE PROJECT SITE DURING DEMOLITION AND/OR RENOVATION ACTIVITIES DESCRIBED IN THE NOTIFICATION. EVIDENCE THAT THIS PERSON AND ALL OTHER PROJECT PERSONNEL HAVE ACCOMPLISHED THIS TRAINING WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS AND ANYTIME REGULATED ACTIVITIES ARE BEING CONDUCTED ON SITE.

I FURTHERMORE UNDERSTAND THAT I AM RESPONSIBLE FOR THE ACCURACY AND COMPLETENESS OF THE INFORMATION CONTAINED WITHIN THIS NOTIFICATION SUBMITTAL, AND FOR PROMPT SUBMITTAL OF ALL REVISIONS, SUPPORTING DOCUMENTS, AND PROJECT FEES.

PRINTED NAME OF AGENT/DESIGNEE:		
SIGNATURE OF AGENT/DESIGNEE:		DATE:
REPRESENTING: ☐ OWNER ☐ CONSULTING FIRM ☐ OTHER TRADE CONTRACTOR OTHER TRADE TYPE:		
☐ GA ABATEMENT CONTRACTOR	COMPANY CERTIFICATE #	EXPIRATION DATE:

- **ALWAYS REFER TO THE INSTRUCTIONS WHEN IN DOUBT ABOUT PROPER COMPLETION OF ANY SECTION**
- **NEVER LEAVE BLANK SPACES – INSERT 'N/A' OR 'UNKNOWN' FOR ANY BLANK WHERE YOU DO NOT HAVE THE INFORMATION REQUESTED**
- **ALWAYS PRINT RESPONSES NEATLY AND LEGIBLY**
- **ALWAYS KEEP A COPY OF THIS FORM FOR YOUR RECORDS, AND PROVIDE COPIES TO ALL OTHER INVOLVED PARTIES**
- **DO NOT FAX THE ENTIRE NOTIFICATION WHEN SUBMITTING ADVANCE NOTIFICATIONS – USE THE FIRST PAGE ONLY OF THIS FORM. SUBMIT THE ENTIRE FORM VIA MAIL TO THE LOCKBOX FOR FEE PROJECTS OR TO THE EPD OFFICES FOR COURTESY & DEMOLITION NOTIFICATIONS**
- **EPD NO LONGER ACCEPTS 'FAX ONLY DOCUMENTS' – DO NOT FAX THE ENTIRE PROJECT NOTIFICATION – SUBMIT THE ENTIRE FORM VIA MAIL.**
- **NEVER SUBMIT PROJECTS WHERE FEES ARE DUE WITHOUT ATTACHING THE REQUIRED FEE CHECK OR MONEY ORDER**
- **NOTIFICATIONS WITH FEES MUST BE MAILED TO THE EPD ASBESTOS FEES POST OFFICE ADDRESS. NOTIFICATIONS WITHOUT FEES MAY BE MAILED DIRECTLY TO THE EPD OFFICES.**
- **DO NOT SUBMIT 'TWO-SIDED' PHOTO COPIES**

IT IS YOUR RESPONSIBILITY TO SUBMIT THIS FORM ACCURATELY COMPLETED AND ACCOMPANIED BY ALL APPLICABLE FEES. EFFECTIVE IMMEDIATELY, YOU WILL BE ISSUED A NOTICE OF DEFICIENCY FOR THE FIRST FAILURE TO SUBMIT A COMPLETE & ACCURATE FORM AND ALL APPLICABLE FEES, A NOTICE OF VIOLATION ON THE SECOND FAILURE, AND WILL BE REQUIRED TO ATTEND AN ENFORCEMENT CONFERENCE ON THE THIRD FAILURE. BEGINNING JULY 31, 2006, PROJECT NOTIFICATIONS SUBMITTED ON ANY FORM OTHER THAN THIS ONE FORMS WILL BE RETURNED AND YOU WILL BE REQUIRED TO RESUBMIT THE NOTIFICATION ON THE CORRECT FORM

SUMMARY INSTRUCTIONS FOR COMPLETING THE GEORGIA EPD
PROJECT NOTIFICATION FOR ASBESTOS RENOVATION, ENCAPSULATION, OR DEMOLITION PROJECTS

Complete the following Sections and provide the information requested according to the type of project being performed.

To Be Completed For Demolition Work (No fees due for Demolition Projects.)

Section 1AVType of Notice

Section 1BVType of Project

Section 2 - Site Information

Section 3B - Demolition Contractor

Section 4 - ACM Information Asbestos Inspection Required for Compliance of Georgia Rules.

Section 5 - Work Schedules for Demolition

Section 6 - ACM Amounts & Type Codes

- All ACM which already is or will become friable must be removed before demolition; only non-friable ACM may be remaining during the demolition and it must **ALL** be collected, packaged, labeled, transported and disposed as ACM Waste).
- If all ACMs have been removed from the project site, Page 2 is not required.

Section 7 - Waste Transporter and Disposal Site of Demolition Waste, and Building Owner (All Required)

Section 8 - Work Methods

Section 9 - Additional Project Information

Certification of Information and Acknowledgement

(No fees due for Demolition Projects.)

To Be Completed For Asbestos Removal and Encapsulation Projects (Fees due for Abatement Projects.)

Section 1A - Type of Notice

Section 1B - Type of Project

Section 2 - Site information

Section 3A - Abatement Contractor

Section 4 - ACM Information Asbestos Inspection Required for Compliance of Georgia Rules.

Section 5 - Work Schedules for Abatement and Encapsulation Projects.

Section 6 - ACM Amounts, Type Codes, and Fee Calculation

Section 7 - Waste Transporter, Disposal Site, and Building Owner Information

Section 8 - Work Methods

Certification of Information and Acknowledgment

To Be Completed for A Revision To A Prior Notification

Section 1A Type of Notice

Section(s) *All Sections, In Which the Prior Information Has Changed or Needs To Be Updated.*

- *Check the Revision Box In Each of The Revised Sections and Update the Information.*

Certification of Information and Acknowledgment

DETAILED INSTRUCTIONS ARE AVAILABLE FOR FILLING OUT EACH OF THESE SECTIONS.

INSTRUCTIONS FOR COMPLETING THE GEORGIA EPD
PROJECT NOTIFICATION FOR ASBESTOS RENOVATION, ENCAPSULATION, OR DEMOLITION PROJECTS

The Georgia EPD realizes that paperwork completion is tedious and time-consuming, but treats paperwork infractions with the same gravity with which it views work practice violations. It is incumbent upon all individuals engaged in regulated asbestos-related activities to become familiar with all state and federal requirements, including proper paperwork completion. The following instructions are a step-by-step guide that should lead you successfully through the notification completion process. Should you still have questions or need assistance with completion of the notification documents, please call the Asbestos Program at (404) 363-7026.

HOW SHOULD YOU SUBMIT YOUR NOTIFICATION?

'ADVANCE NOTIFICATIONS': EPD ***STRONGLY*** discourages the submittal of advance notifications. However, if it is completely unavoidable due to extenuating circumstances, EPD requests that you not submit the entire project notification via fax. If you must submit an advance notification, **ONLY FAX THE COMPLETED FIRST PAGE OF THE NOTIFICATION FORM**! Submit the entire completed form via mail, following instructions for submittal of notifications that EITHER do or do not involve fees.

FOR PROJECTS WHERE FEES ARE DUE:	FOR PROJECTS WHERE FEES ARE NOT DUE:
EPD ASBESTOS FEES LOCKBOX POST OFFICE BOX 101173 ATLANTA, GEORGIA 30392 (SEE SECTION 6 FOR FEE CALCULATION INSTRUCTIONS)	EPD ASBESTOS PROGRAM ATTN: ASBESTOS NOTIFICATIONS 4244 INTERNATIONAL PARKWAY, SUITE 104 ATLANTA, GEORGIA 30334

MAILED FORMS: If your notification is a courtesy notification (see explanation below); a demolition only notification (the only two types of projects that are fee exempt); or a revision of a previously submitted notification where the fee amount **does not** change (a date change revision, for example), you may send the form directly to the EPD office at the address shown on the right above (*not* the lockbox address).

WHAT TYPE OF NOTICE SHOULD YOU SUBMIT? (SECTION 1A)

Asbestos Project Notifications will always fall into one of the following categories. ALWAYS check the box (☑) applicable to your current submittal:

☑ **ORIGINAL INITIAL** - The first time a project notification is submitted for the project to which the notification applies.

☑ **ANNUAL BLANKET** – The Annual Blanket Notification runs for one calendar year (January through December) and is designed solely for use on single large facilities where multiple small projects (less than 160 square feet, 260 linear feet, or 35 cubic feet in size) are to be conducted, but where the TOTAL amount of small abatement work will exceed these parameters. Typical candidates for the annual blanket notification include factories, power plants, and large educational facilities. Recipients of an Annual Blanket Notification must still submit a separate 10-Day project notification and fees when any single project exceeds the 'small project' definition. Each individual project handled under the Annual Blanket Notice must be less than 160 square feet, 260 linear feet or 35 cubic feet of friable asbestos containing material. A $1,000 fee must be submitted with each Blanket Notification.

☑ **REVISION** – To notify the EPD of any changes to the project after the Original Initial notification has been submitted. Correct use of the revision option can prevent the need to submit a separate Notice of Change for the project, and is a convenience for Contractors and Building Owners when used as it is designed to be used. To submit a revision, CHECK THE BOX (☑) in Section 1A and list the revision number. Also check the box in the heading of the section you are revising, strike through the incorrect information, and insert the correction. If additional fees are due, be sure to submit them to the lockbox and include the additional fee check information in the fee schedule. DATE CHANGE REVISIONS SHOULD BE SENT DIRECTLY TO THE EPD OFFICE *STREET ADDRESS.* For all revisions, re-sign and re-date the certification section of the project notification before resubmitting.

☑ **CANCELLATION** – Many times despite the best of planning a project must be cancelled. To cancel a project, resubmit the notification form IN WRITING and place a (☑) in the cancellation box. You may submit a written Letter of Credit for fees previously paid for this project and mail it to the EPD office along with the cancelled notification. If you are requesting a refund, be sure to include your federal employer identification (FEI) or Social Security number on your refund request, and allow 6-8 weeks for the refund to be processed and mailed to you.

WHAT TYPE OF PROJECT ARE YOU CONDUCTING? (SECTION 1B)

This section is designed to allow you to communicate the type of project you will be conducting. You can also use this space to indicate that you are submitting an emergency notification. Frequently, more than one of these boxes should be checked (☑) to completely convey the type of project you will be conducting. It is very important that ALL applicable boxes be checked.

☑ **RENOVATION/ABATEMENT ONLY** – Where the project only involves the removal and disposal of asbestos containing materials. "Renovation" means the altering of, taking out, stripping, clean up, disposal of, or removal of friable or potentially friable asbestos containing materials from any facility, facility component or residential dwelling, equal to or greater than 10 square feet or 10 linear feet, for renovation or maintenance purposes.

☑ **RENOVATION/ABATEMENT PRIOR TO DEMOLITION** - Removal/abatement of friable asbestos containing materials equal to or greater than 10 square feet or 10 linear feet (see definition of Renovation Only above), in preparation for demolition activities to be performed by someone else.

☑ **DEMOLITION ONLY** – Where the projects only entails demolition of any structure that has been thoroughly inspected for the presence or absence of asbestos. "Demolition" means the wrecking or taking out of any load supporting structural member of a facility together with related handling operations, or the intentional burning of any structure. *Notification is required regardless of the presence or absence of asbestos containing materials.*

☑ **ENCAPSULATION** – A project in which special coatings approved for asbestos encapsulation will be used to cover the asbestos containing materials and prevent any future release of asbestos fibers. 'Encapsulation' means the process of coating, binding, or resurfacing walls, ceilings, pipes, or other structures with a sealant to prevent friable asbestos from becoming airborne.

☑ **JOINT RENOVATION/DEMOLITION** – Where both renovation and demolition activities as described above will be conducted by the same Contractor. In other words, if the same Contractor will perform the removal/abatement of friable asbestos containing materials equal to or greater than 10 square feet or 10 linear feet followed by demolition activities, then he may submit a Joint Notification If demolition is to be conducted by a different company, that company must submit a separate notification.

☑ **ORDERED DEMOLITION** – A demolition project ordered by a government agency. If the property has been condemned, the Order of Condemnation must be included with the project notification.

ADDITIONAL PROJECT NOTATIONS

☑ **EMERGENCY** – Abatement, Encapsulation or Demolition projects that were unplanned, but result from a sudden, unexpected event that if not immediately attended to presents a safety or public health hazard, is necessary to protect equipment from damage, or is necessary to avoid imposing an unreasonable financial burden. *Waiver of the required 10 working day notification period will be granted on a case-by-case basis.* A letter of explanation regarding the emergency situation from the Owner of the Project, or their representative, must accompany the notification. EPD must be notified of the emergency situation within 24 hours from the time of its occurrence, or from the time you are contacted with a request for emergency work to be performed. *We highly recommend you call an associate in the EPD Asbestos Program to discuss the situation to obtain their agreement on the emergency project.* The main number for the Asbestos Program is 404-363-7026. Complete and fax the FIRST PAGE only of the Project Notification form to (404)362-2563. The entire original notification and fee payment must be mailed to the Lockbox address within 7 days from the date of emergency work beginning.

☑ **COURTESY –** A Courtesy Notification is ***ONLY*** submitted for small asbestos abatement/disturbance/encapsulation projects that ordinarily would not be regulated. In other words, any project involving friable asbestos removal of less than 10 square feet or 10 linear feet; it may also be used to cover a non-friable asbestos removal project.

SECTION 2 – SITE INFORMATION

PROJECT NAME - Identify the exact location where abatement or demolition work is going to take place. Provide the name of the building, company, or other description of all structures involved in the project here. For example: "Vacant House", "Residence", "Commercial Bldg", "ABC Company", "Office Bldg"). If the project is part of a DOT road-widening project, please include parcel number and structure number.

PROJECT ADDRESS - Street address where abatement, encapsulation, or demolition will take place.
*If project involves multiple buildings/structures at one location, list all addresses, building names, unit numbers, etc. Use a separate sheet of paper as an attachment, if necessary.
*If project involves multiple buildings/structures at different addresses, you may group together those addresses on the same street and/or adjacent streets, (within a few block radius). Use a separate sheet of paper as an attachment, if necessary. Include a site map or diagram showing locations.

- **CITY/ZIP/COUNTY - C**omplete all areas. *YOU MUST LIST THE COUNTY –* ***DO NOT SUBMIT THE NOTIFICATION WITHOUT THE COUNTY NAME INCLUDED!***
- **NEAREST MAJOR INTERSECTION -** For example: "State Hwy 41 near Windy Hill Rd"; "South Houston Lake Rd near State Hwy 96")
- **BLDG SIZE IN SQ. FEET -** Square foot measurement of the entire building (all floors and spaces) combined.
- **AGE OF BLDG IN YEARS -** Age of building in years.
- **NUMBER OF FLOORS IN BUILDING -** Total number of floors in building, including sub-basement, basement, mezzanine, attic, and penthouse. Each level that can be occupied should be counted as a separate floor.
- **SPECIFIC LOCATION OF ASBESTOS BEING REMOVED -** Provide specific area(s) of the structure that are being abated or demolished. For example: "Roof", "Kitchen Floor", "Steam Pipes in Basement", "Throughout Building", "Hallway", "Floor Number _____", "Room Number_____", etc).

SECTION 3 – PROJECT CONTRACTORS

In this section, you must list all CONTRACTORS to be involved with the actual removal and/or demolition of the project. If you are a Contractor removing the asbestos prior to a demolition, you should still list the name of the demolition company if known. BE SURE TO CHECK (☑) THE CORRECT BOX FOR THE TYPE OF PROJECT YOU ARE DIRECTLY RESPONSIBLE FOR CONDUCTING AND FOR WHICH YOU ARE SUBMITTING THE NOTIFICATION!!!

3A – ABATEMENT CONTRACTOR – Name of the company that will perform the actual asbestos renovation/abatement.

- **CONTRACTOR STREET ADDRESS** – The actual physical location of the Asbestos Removal Contractor's place of business. DO NOT USE A POST OFFICE BOX IN THIS SPACE!
- **COMPANY CERTIFICATE NUMBER** – Recently issued asbestos contractor company certificates include a new identifying number. For established contractors, this number is being assigned as licenses are renewed, so if you have not yet been issued a certificate number there is no need for alarm. You will be issued the number during your next license renewal. The certificate issued for your Company license bears or will bear a number similar to this: "20-0708-123". When your new certificate is issued, or if you already have the revised Asbestos Contractor License Certificate, this is the number you should list in the Company Certificate space.
  - **CITY/STATE/ZIP/PHONE/FAX** – You must complete each space.
  - **LICENSED AGENTS NAME** – Name of the person licensed by EPD as the Principal Agent for this company
  - **AGENT'S ID NUMBER** – The agent's identification card issued by EPD bears a number similar to this one: "50123", and should be placed here.
  - **EXPIRES** – The date on which the above described identification card expires.
  - **CELL PHONE** – The cellular or pager number for the Principal Agent.

3B – OTHER (DEMO/SUB/GENERAL) CONTRACTOR – Name of company performing work OTHER THAN asbestos removal.

- **JOB CONTRACTED –** Place a short, concise description of the additional work contracted here. For example: "General Contractor", "Demolition", "Clearing & Grading", "Debris Clean-up", etc.
- **OTHER CONTRACTOR STREET ADDRESS** – The actual physical location of this Contractor's place of business. DO NOT USE A POST OFFICE BOX IN THIS SPACE!
- **CITY/STATE/ZIP/PHONE/FAX –** You must complete each blank.

(If more than 2 Contractors are involved with the project, use a separate sheet as an attachment to provide additional information)

SECTION 4 – ASBESTOS CONTAINING MATERIAL(S) (ACM) INFORMATION

IS ASBESTOS PRESENT?

- **YES –** A thorough inspection for the presence of absence of asbestos has been conducted and the written results indicate that asbestos **IS** present.
- **NO –** A thorough inspection for the presence of absence of asbestos has been conducted and the written results indicate that asbestos **IS NOT** present.
- **FRIABLE –** "Friable Asbestos-Containing Material" means any material which is applied onto ceilings, walls, structural members, piping, boilers, tanks, pumps, ductwork or any other part of the building containing more than 1 percent asbestos, by weight, and which when dry may be crumbled, pulverized, or reduced to powder by hand pressure. (See Definitions Section of Instructions & Section 6 of Notification Form)
- **NON-FRIABLE –** "Non-Friable Asbestos-Containing Material" means any asbestos-containing material that does not meet the definition of "FRIABLE". See Definitions Section of Instructions & Section 6 of Notification Form)
- **BOTH –** Both "Friable" and "Non-friable" materials are present on this project.

DID AN AHERA ACCREDITED INSPECTOR INSPECT THIS SITE?
Was the portion of the abatement project, or demolition area described in Section 2 of this form, thoroughly inspected by an AHERA Accredited Asbestos Inspector? Check ☑ the appropriate answer.

- **YES**
- **NO**
- **UNKNOWN**
- **ASSUMED ASBESTOS** - A thorough inspection for the presence of absence of asbestos HAS NOT been conducted but based on the type of material(s) being disturbed the decision has been made to treat the material(s) as ACM, meaning that all necessary precautions and procedures will be followed.
- **INSPECTOR NAME** – Name of individual who performed the inspection.
- **INSPECTOR PHONE** – Number at which the Inspector may be reached, starting with area code.
- **ACCREDITATION COURSE** – Name of course taken to obtain **ASBESTOS INSPECTOR** accreditation. For example: "Asbestos Inspector Initial", "Inspector Refresher"
- **CERTIFICATE NUMBER** – Number on the Asbestos Inspector Certificate of Completion issued by the Training Provider.
- **EXPIRES** – Expiration date on certificate issued by Training Provider.

SECTION 5 – WORK SCHEDULES

IMPORTANT NOTICE: A 10 (TEN) WORKING DAY NOTIFICATION IS REQUIRED FOR NON-EMERGENCY NOTIFICATIONS PRIOR TO COMMENCING ANY REGULATED ASBESTOS ACTIVITY!!!!

WORKING DAYS ARE CONSIDERED MONDAY THROUGH FRIDAY. A HOLIDAY FALLING ON THESE DAYS WILL BE COUNTED AS A WORKING DAY.

WORKING DAYS ARE COUNTED FROM THE DATE OF:

- US POST OFFICE POSTMARK DATE
- FEDEX/UPS SHIPPING DATE
- HAND DELIVERY OF NOTIFICATION
- DATE OF ADVANCE NOTIFICATION VIA FAX
- ELECTRONIC FILING OF PROJECT NOTIFICATION

NOTIFICATIONS POSTMARKED ON A SATURDAY OR SUNDAY DO NOT BEGIN THE 10 WORKING DAY NOTIFICATION PERIOD UNTIL THE FOLLOWING MONDAY.

FOR ALL PROJECTS –

Provide the project START date and END dates. NOTE: If the Consultant or Project Owner is submitting the project notification, and project dates are as yet undetermined, submit dates as **TBD** (To Be Determined). THE ABATEMENT OR DEMOLITION CONTRACTOR WHO RECEIVES THE CONTRACT MUST SUBMIT A REVISION TO UPDATE THE PROJECT DATES BEFORE WORK BEGINS.

WORK DAYS - Provide actual days of the week on which work will be performed – NOT the number of days worked per week. For example: "M, Tu, Th" or "M-F"

WORK HOURS - Provide the actual times of the day the crew will be on site – NOT the number of hours worked per day. For example "7A – 4P" or "5P – MIDNIGHT"

PHASED PROJECTS - If multiple buildings/structures are involved, break project into Phases, and identify project dates per Phase. Use an additional page to described phased project start and stop dates and work hours in detail.

SECTION 6 – ACM TYPES INFORMATION AND FEE SCHEDULE

Use this section to identify and type and total quantity of asbestos that will be disturbed during this project and calculate fees owed based on your findings. All ACM's identified in Section 4 must be described completely here.

ACM TYPE(S)

- Step 1 - Locate the type of ACM you will be disturbing in COLUMN A. Use the Category 1, 2 and RACM headings in COLUMN B to determine the material's current status, then locate the category the material will **MOST LIKELY BECOME** as a result of your abatement activities in COLUMN C.
- Step 2 - Show the combined LINEAR FOOT (LF) and/or SQUARE FOOTAGE of the material to be disturbed in COLUMN D, E, or F, depending on the determination made from the code in COLUMN C
- Step 3 - In COLUMN G1, circle the corresponding ACM type code for any material amount listed in COLUMN(S) D, E, or F. In COLUMN G2, enter the type code(s) in the space(s) labeled CAT 1, CAT 2, and RACM; and
- Step 4 – Total COLUMNS D, E, and F and insert the total(s) in the appropriate space(s) provided.

DEFINITIONS:

CATEGORY 1 NON-FRIABLE ACM includes asbestos-containing packing, gaskets, resilient floor covering, mastics, and asphalt roof products that contain greater than 1% asbestos. *Category 1 materials that will likely become friable as a result of removal activity must be listed in the RACM category instead of here.*

CATEGORY 2 NON-FRIABLE ACM includes any material, excluding Category 1 non-friable ACM, containing more than 1% asbestos that, when dry, cannot be crumbled, pulverized, or reduced to powder by hand pressure. These are the asbestos-cement products, including Transite. *Category 2 materials that will likely become friable as a result of removal activity must be listed in the RACM category instead of here.*

RACM (Regulated Asbestos-Containing Material) means friable asbestos containing material, Category 1 non-friable ACM that has become friable, Category 1 non-friable ACM that will be or has been subjected to sanding, grinding, cutting, or abrading, or Category 2 non-friable ACM that has a high probability of becoming or has become crumbled, pulverized, or reduced to powder by the forces expected to act on the material in the course of demolition or renovation operations

FEE CALCULATION SECTION

Step 1 - Use the check box ☑ to indicate whether the project is RESIDENTIAL (BOX H.) or NON-RESIDENTIAL (BOX I.).

Step 2 - Place the total from COLUMN F on the correct line provided in either "BOX H(a). – RESIDENTIAL" or "BOX I(a). – NON-RESIDENTIAL".

Step 3 – Multiply the number in BOX H.(a) or I(a) by .10 (Ten Cents - 10¢) and place the resulting amount in line H(b). or I(b). **THE RESULTING FIGURE IS THE AMOUNT OF FEES OWED AND WHICH MUST ACCOMPANY THE NOTIFICATION, SUBJECT TO THE MINIMUM/MAXIMUM FESS OUTLINED BELOW. IF FEES ARE DUE FOR ANY PROJECT, SHOW THE CHECK NUMBER AND TOTAL AMOUNT OF FEES DUE IN THE SPACE PROVIDED. IF YOU ARE NOT IMMEDIATELY SUBMITTING THE FEE CHECK, YOU MUST EXPLAIN WHY NOT AND IDENTIFY WHO IS RESPONSIBLE FOR THE FEE PAYMENT AND WHEN IT WILL BE SUBMITTED.**

RESIDENTIAL PROJECTS: Residential projects are subject to a minimum fee of $25 and a maximum fee of $50. THEREFORE, THE FEE YOU SUBMIT FOR RESIDENTIAL PROJECTS SHOULD NEVER BE LESS THAN $25 AND NEVER BE MORE THAN $50.

NON-RESIDENTIAL PROJECTS: Non-residential projects are subject to a minimum fee of $25 and a maximum fee of $1,000. THEREFORE, THE FEE YOU SUBMIT FOR NON-RESIDENTIAL PROJECTS SHOULD NEVER BE LESS THAN $25 AND NEVER BE MORE THAN $1,000.

DEFINITIONS:

RESIDENTIAL PROJECT: A residential dwelling means any family residence or apartment building with four or fewer dwelling units.

NONRSIDENTIAL PROJECT: A non-residential project means any project conducted on any building that would fall outside the guidelines established by the definition of a residential dwelling. I.E.: any non-residential structure, or any residential structure with five or more dwelling units.

SECTION 7 – BUILDING OWNER, WASTE TRANSPORTER, AND DISPOSAL SITE INFORMATION

WASTE TRANSPORTER:

- **NAME OF COMPANY**
- **CONTACT NAME: Name of person at Transport Company to call, if necessary.**
- **ADDRESS/CITY/STATE/ZIP/PHONE/FAX**: Complete all areas

DISPOSAL SITE INFORMATION

- **WASTE DISPOSAL SITE NAME**: Name of Landfill
- **DISPOSAL SITE COUNTY**: Provide County name
- **ADDRESS/CITY/STATE/ZIP/PHONE/FAX:** Complete all areas

BUILDING OWNER

- **OWNER OF PROJECT SITE/FACILITY:** Name of legal owner of facility/property.
- **OWNER'S REPRESENTATIVE:** Name of person (other than Contractor) acting on behalf of Owner, particularly if completing & submitting this form.
- **OWNER'S STREET ADDRESS:** For service of legal process if required.
- **OWNER'S MAILING ADDRESS**
- **CITY/STATE/ZIP/PHONE/FAX** Complete all areas
- **TELEPHONE NUMBER:** Number at which Contact person may be reached, starting with area code

SECTION 8 – WORK PRACTICES

The method(s) of demolition and/or renovation activity and a description of work practices and engineering controls to be used on this project. Describe fully what types of abatement and/or demolition activities are going to take place, the method(s) of removal and/or demolition that will be used, and controls in place to prevent asbestos emissions. Describe what clearance criteria will be used. Attach a separate sheet of paper if more room is needed to answer this section.
FOR EXAMPLE:

- *"Wet spud bar and chemical removal of FT M with critical barriers. 1 negative air. Visual clearance only";*
- *"Wet spud bar removal of ACS over 6 mil plastic on ground. Place in plastic lined roll off dumpster. Visual clearance only"*
- *"Demo with front end loader. Push down, wet, and machine load into 30 CY roll off dumpster"*

SECTION 9 - ADDITIONAL PROJECT INFORMATION

- **WILL ASBESTOS REMAIN IN THE PROJECT AREA?** Please answer "YES", "NO", or "UNKNOWN", and explain a YES or UNKNOWN answer.
- **IF NO ASBESTOS IS PRESENT, WAS THIS THE RESULT OF A PREVIOUS ABATEMENT?**
- **IF THE PROJECT WAS PREVIOUSLY ABATED, PROVIDE ALL REQUESTED INFORMATION FOR THE PRIOR ABATEMENT COMPANY.**

CERTIFICATION OF INFORMATION AND ACKNOWLEDGEMENT
PROVIDE ALL REQUESTED INFORMATION - DO NOT LEAVE ANY SPACES BLANK AND INCLUDE SIGNATURE

PRINTED NAME OF AGENT/DESIGNEE - Print or type full name of person submitting form
SIGNATURE OF AGENT OR DESIGNEE - The person submitting this form must sign here
DATE - Date project notification is signed
REPRESENTING - Place check (☑) mark at appropriate title

☑ OWNER - Owner of Facility in which project is being performed

☑ CONSULTING FIRM - Asbestos or Environmental Consultant; Architect, Engineer

☑ OTHER TRADE CONTRACTOR/OTHER TRADE TYPE – Representing any other trade involved on this project. For example: "General Contractor", "Demolition", "Clearing & Grading", "Debris Clean-up", etc.

☑ GA ABATEMENT CONTRACTOR – An EPD Licensed Asbestos Abatement Contractor

- COMPANY CERTIFICATE NUMBER – See "Company Certificate Number" Information in Section 3 Instructions.
- EXPIRATION DATE - The date the company certificate expires

NOTE: If an Advance Project Notification form is submitted by someone other than the Contractor(s) who perform the asbestos abatement or demolition activities - such as the Consultant or Owner - in order to start the 10 working day notification period while the contract is out for bid, A REVISED NOTIFICATION MUST BE SUBMITTED BY THE CONTRACTOR TO WHOM THE PROJECT IS AWARDED BEFORE WORK BEGINS, AND THAT CONTRACTOR MUST SIGN THE CERTIFICATION AREA OF THE REVISED NOTIFICATION FORM.