

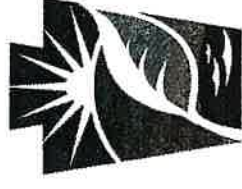
**You CANNOT**  
**demolish any**  
**building for**  
**commercial development**  
**without notifying DEP**



Get notification form at: [www.dep.state.pa.us](http://www.dep.state.pa.us)

Go to: Asbestos

**Questions? Call (814.332.6940)**



**pennsylvania**

DEPARTMENT OF ENVIRONMENTAL PROTECTION

## **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). DEP's 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 November 20, 1990. Should a project be subject to the NESHAP regulations, a minimum 10-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 (L&I) 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. L&I 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 L&I 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 – a building or structure or any group of buildings or structures at a single demolition or renovation site that is under the control of the same owner or operator.

#### **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 L&I. 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 Acts 194 and 161. Call the L&I 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 **10 WORKING DAYS** prior to the start of the project. **All demolitions of regulated facilities, as defined above, also require a 10-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. In Allegheny County, call 412-578-8133. It is important to contact the appropriate office if the 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 can also be printed from the DEP website. Instructions are provided with the form. The notice must be delivered by the U.S. Postal Service, commercial delivery service or hand delivery. **FACSIMILES ARE NOT ACCEPTABLE.**

#### **WHERE IS THERE MORE INFORMATION?**

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

**Southeast Regional Office** – 484-250-5920 (Bucks, Chester, Delaware, and Montgomery counties)

**Northeast Regional Office** – 570-826-2511 (Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, and Wyoming counties)

**South-central Regional Office** – 717-705-4702 (Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, and York counties)

**North-central Regional Office** – 570-327-3638 (Bradford, Cameron, Centre, Clearfield, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, and Union counties)

**Southwest Regional Office** – 412-442-4000 (Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, and Westmoreland counties)

**Northwest Regional Office** – 814-332-6940 (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.dep.pa.gov](http://www.dep.pa.gov).





## 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 provided. **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

The PA DEP Central Office is no longer processing the asbestos demo/reno notification form. Do not send the notification form to the P.O. Box 8468 or the 400 Market Street, Harrisburg address. The notification submission addresses, listed below, are to be used depending on the county location of your project:

If the regulated facility address is in Bucks, Chester, Delaware, or Montgomery Counties, send your notification information to:

PA DEP Southeast Region  
Asbestos Notification  
2 East Main Street  
Norristown, PA 19401-4915  
Telephone: 484-250-5920

If the regulated facility address is in Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, or Wyoming Counties, send your notification information to:

PA DEP Northeast Region  
Asbestos Notification  
2 Public Square  
Wilkes-Barre, PA 18701-1915  
Telephone: 570-826-5547

If the regulated facility address is in Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, or York Counties, send your notification information to:

PA DEP Southcentral Region  
Asbestos Notification  
909 Elmerton Avenue  
Harrisburg, PA 17110-8200  
Telephone: 717-705-4702

If the regulated facility address is in Bradford, Cameron, Centre, Clearfield, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, or Union Counties, send your notification information to:

PA DEP Northcentral Region  
Asbestos Notification  
208 West Third Street, Suite 101  
Williamsport, PA 17701-6448  
Telephone: 570-321-6580

If the regulated facility address is in Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, or Westmoreland Counties, send your notification formation to:

PA DEP Southwest Region  
Asbestos Notification  
400 Waterfront Drive  
Pittsburgh, PA 15222-4745  
Telephone: 412-442-5214 for Armstrong, Beaver, Greene, and Washington Counties  
Telephone: 724-925-5428 for Cambria, Fayette, Indiana, Somerset, and Westmoreland Counties

If the regulated facility address is in Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, or Warren Counties, send your notification formation to:

PA DEP Northwest Region  
Asbestos Notification  
230 Chestnut Street  
Meadville, PA 16335-3481  
Telephone: 814-332-6634

**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 as listed.

**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.

**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

**Labor & Industry Contact**

Department of Labor and Industry  
Bureau of Occupational and Industrial Safety  
Seventh and Forster Streets - Room 1623  
Harrisburg, PA 17120  
717-772-3396



**ASBESTOS ABATEMENT AND DEMOLITION/RENOVATION NOTIFICATION FORM**

<b>For Official Use Only</b>	<b>Date Received 1</b>	<b>Date Received 2</b>
Postmark Date: _____	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
Project ID#: _____		
Permit #: _____		
Other #: _____		
Inspector: _____		
<p><b>NOTICE:</b> 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).</p>		

**REFER TO THE ATTACHED INSTRUCTIONS FOR INFORMATION AND REQUIREMENTS.**

1.	<b>TYPE OF NOTIFICATION (check one):</b> <input type="checkbox"/> Revision (highlight here, and changes) <input type="checkbox"/> Postponement Date of Initial Notification or, if previously revised, date of last revision: _____	<input type="checkbox"/> Initial <input type="checkbox"/> Phase of Annual Notification <input type="checkbox"/> Annual Notification <input type="checkbox"/> Cancellation
2.	<b>PROJECT LOCATION (check one):</b> <input type="checkbox"/> Allegheny County <input type="checkbox"/> City of Philadelphia <input type="checkbox"/> Other Location in PA (specify county): _____	
3.	<b>For Allegheny County and City of Philadelphia projects only:</b> 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.	<b>WILL ALTERNATIVE METHODS TO ANY OF THE APPLICABLE REGULATIONS BE USED?</b> <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.	<b>TYPE OF OPERATION (check one):</b> <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.	<b>FACILITY DESCRIPTION:</b> 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.	<b>ABATEMENT CONTRACTOR:</b> 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?  Yes  No  
 Procedure, including analytical method, if appropriate, used to detect the presence of asbestos material:  
 \_\_\_\_\_

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  Yes  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 *	Code **	Code ***	Code ****
Type of ACM	Units	Type of abatement	Final Clearance
FRI - Friable ACM	LF - Linear ft.	REM - Removal	PCM - Phase contrast microscopy
NF1 - Cat I nonfriable ACM	SF - Square ft.	CAP - Encapsulation	TEM - Transmission electron microscopy
NF2 - Cat II nonfriable ACM	CF - Cubic ft.	CLO - Enclosure	
(Note: Allegheny County treats all ACM as friable)		NON - None	

13. Is this project regulated by NESHAP  Yes  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:

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15. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK:

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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:

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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)  Contractor  Owner  
 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: \_\_\_\_\_  am  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**

File No.:	_____
Permit No.:	_____
Date:	_____

## APPLICATION FOR UCC DEMOLITION PERMIT

**EXPEDITE REVIEW. ADDITIONAL FEE SUBMITTED.**

<p style="text-align: center;"><b>Site Information</b></p> <p><b>Political Subdivision and County</b> names are required.</p>	<p>Facility Name (name of company, mall, institution, university, etc.): _____</p> <p>Building and/or Tenant Name _____</p> <p>Street Number and Name _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Political Subdivision: _____ County: _____</p> <p>Contact Name: _____ Phone: _____</p> <p>File Number (if approved for occupancy by L &amp; I) _____</p>
<p style="text-align: center;"><b>Site Plan Requirements</b></p>	<p>Three copies of a site plan showing the proposed demolition must accompany this application. These must be drawn to scale (no less than 1/8" = 1') on pages which are at least 18" x 24." Each plan must detail:</p> <ul style="list-style-type: none"> <li>Location of all buildings or structures to be demolished, distances to property lines and distances to sidewalks, pavement and curbs where they abut property lines.</li> <li>Location of any existing buildings or structures that will remain on the site.</li> <li>Area to be filled to existing grade and seeded or to be fenced and otherwise protected in anticipation of new construction.</li> <li>If applicable, location, dimensions and construction details for pedestrian protections required in section 3306 of the <i>International Building Code</i>.</li> </ul>
<p style="text-align: center;"><b>Owner and Applicant Information</b></p>	<p>Applicant Name _____</p> <p>Street Address _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Phone _____ Fax _____</p> <p>Applicant Signature _____ Date _____</p> <p>Owner Name _____</p> <p>Street Address _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Phone _____</p>
<p style="text-align: center;"><b>Filing Requirements</b></p>	<p><b>OWNER STATEMENT:</b></p> <p>I/we, _____ [signed name(s)] certify that I/we own the property described above for which this application is made for a UCC demolition permit and that the applicant has my/our approval to demolish this property or act as our agent in the demolition of this property.</p> <p style="text-align: right;">Date signed: _____</p> <p><b>FEE SCHEDULE:</b> For an up-to-date listing of fees, please see the Fee Schedule listed on our website (<a href="http://www.dli.pa.gov/Individuals/Labor-Management-Relations/bois">www.dli.pa.gov/Individuals/Labor-Management-Relations/bois</a>) or contact our office for a copy of the Fee Schedule by telephone at 717-787-3806 option 1 or by fax at 717-783-5002.</p> <p>Be sure to include any additional information necessary when mailing this application and the appropriate fee to the Department.</p>
<p style="text-align: center;"><b>For L&amp;I Use Only</b></p>	<p>Check #: _____ Amount: _____ Bates #: _____</p>