



Asbestos Demolition/Renovation Notification Form

General Information

Purpose of the form

The Department of Ecology's (Ecology's) Notification of Demolition and Renovation Form (ECY 070-86 (Rev. 3/07)) is used to notify Ecology in writing of demolition or renovation operations at facilities in Ecology's jurisdiction. Written notification of these activities is required by the asbestos National Emission Standard for Hazardous Air Pollutants (NESHAP), 40 CFR Part 61, Subpart M.

When to use the form

You must submit the notification form to Ecology for:

- All **demolition** projects that meet the definition of a facility (see the **Definitions** section of this form for the definition of a facility).
- All **renovation** projects that:
 - § meet the definition of a facility and
 - § have a combined amount of Regulated Asbestos Containing Materials (RACM) that is at least:
 - 260 linear feet on pipes, or
 - 160 square feet on other facility components, or
 - 35 cubic feet off facility components where the length or area could not be measured previously.

When to submit the form

Your notification form must be postmarked **no less than ten (10) working days** before you start the asbestos removal or demolition activity, unless:

- The demolition was *ordered by a state or local government agency because the facility is structurally unsound and in danger of imminent collapse; or
- It is an *emergency renovation (see the **Definitions** section of this form for the definition of an emergency renovation operation).

*For government-ordered demolition or emergency renovations, you must submit the notification form as early as possible, but no later than the following working day after starting the work. (See the **Definitions** section of this form for the definition of a working day.)

Definitions

- **Facility** means:
 - § Any institutional, commercial, public, industrial, or residential structure, installation, or building. This includes any structure, installation, or building containing condominiums or individual dwelling units operated as a residential cooperative. It does not include residential buildings having four or fewer dwelling units.
 - § Any ship.
 - § Any active or inactive waste disposal site.
 - § Any structure, installation or building that was previously subject to this NESHAP, regardless of its current use or function.
- **Emergency renovation** means: A renovation that was **not planned**, but results 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.

This term includes operations necessitated by non-routine failures of equipment.

- **Working day** means: Monday through Friday, including holidays that fall on any of the days Monday through Friday.

Instructions for completing the form

- I. **Type of notification:** Enter “O” if this is a first-time or original notification. Enter “R” if this is a revision of a prior notification. Enter “C” if the activity has been cancelled.
- II. **Facility information:** Enter the names, addresses, contact person and telephone numbers for the:
- Owner: The legal owner of the site at which the asbestos is being removed or demolition is planned.
 - Contractor: The contractor hired to remove the asbestos.
 - Other Operator: Demolition contractor, general contractor, or any other person who leases, operates, controls or supervises the site.
- III. **Type of operation:** Enter “D” for facility demolition. Enter “R” for facility renovation. Enter “O” for ordered demolitions. Enter “E” for emergency renovations.
- IV. **Is asbestos present?** Answer only “Yes” or “No,” regardless of the amount or type of asbestos.
- V. **Facility description:** Provide detailed information on the areas being renovated or demolished. If applicable, provide the floor numbers and room numbers where renovations are being conducted. Include:
- Site location: Information needed to locate the site if the street address is inadequate.
 - Building size: In square meters or square feet.
 - No. of floors: The number of floors including the basement or ground level floors.
 - Age in years: The approximate age of the facility.
 - Present use/prior use: Describe the primary use of the facility or enter the following codes: “H” for Hospital, “S” for School, “P” for Public Building, “O” for Office, “I” for Industrial, “U” for University or College, “B” for Ship, “C” for Commercial, or “R” for Residence.
- VI. **Asbestos detection procedure:** Describe the methods and procedures used to determine whether asbestos containing material (ACM) is present at the site. Including a description of the analytical methods used. (See your AHERA building inspection results.)
- VII. **Approximate amount of asbestos including:** For both removals and demolitions, enter the amount of Regulated ACM (RACM) to be removed by entering a number in the appropriate box. Enter an X in the box for the appropriate unit of measurement.
- Category I** nonfriable material includes packing, gaskets, resilient floor covering and asphalt roofing materials containing more than one percent asbestos.
- Category II** nonfriable material includes any material other than Category I products that contains more than one percent asbestos and that, when dry, cannot be crumbled, pulverized or reduced to powder.
- VIII. **Scheduled dates of asbestos removal:** Enter the dates for asbestos removal work. This includes any activity, including site preparation, that may break up, dislodge or disturb asbestos material. The start date must be at least **ten (10) working days** from this form’s postmark date, **unless:** (1) this is a revision to a previous notification, (2) this is an emergency renovation, or (3) demolition was ordered by a state or local government agency because the facility is structurally unsound and in danger of imminent collapse. Under these conditions, the start date of the work must be no later than the following working day after starting the work.
- IX. **Scheduled dates of demolition/renovation:** Enter the dates for beginning and ending the planned demolition or renovation. The start date must be at least **ten (10) working days** from this form’s postmark date, **unless:** (1) this is a revision to a previous notification, (2) this is an emergency renovation, or (3) demolition was ordered by a state or local government agency because the facility is structurally unsound and in danger of imminent collapse. Under these conditions, the start date of the work must be no later than the following working day after starting the work.

- X. **Description of planned demolition or renovation work and method(s) to be used:** Describe the demolition and renovation techniques to be used. Describe the areas and types of facility components that will be affected by this work.
- XI. **Description of engineering controls and work practices to be used to control emissions of asbestos at the site:** Describe the work practices and engineering controls selected to ensure compliance with the regulations. Include both asbestos removal and waste-handling emission control procedures.
- XII. **Waste transporter:** Enter the name, address, contact person, and telephone number for the person or company responsible for transporting ACM from the removal site to the waste disposal site. If the removal contractor or property owner is the waste transporter, state "same as owner" or "same as removal contractor." If additional parties are responsible, submit an additional sheet with the form that gives complete information on all the parties.
- XIII. **Waste disposal site:** Enter the complete name, location and telephone number of the facility that is the waste disposal site. If the ACM is to be disposed of at more than one site, submit an additional sheet with the form that gives complete information on all the sites.
- XIV. **If demolition is ordered by a government agency, please identify the agency below:** Enter the name and title of the responsible official, their agency, authority under which the order was issued, the date(s) of the order and the date(s) of the ordered demolition.
- XV. **Emergency renovation information:** Give the date and time of the emergency. Describe the event and its resulting unsafe conditions, equipment damage or financial burden. The information should be detailed enough to evaluate whether a renovation qualifies for an emergency exemption.
- XVI. **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:** Give enough information to show that you have considered and can implement appropriate actions to control asbestos emissions adequately. At a minimum, these actions must conform with applicable work practice standards.
- XVII. **Certification of presence of trained supervisor and verification:** You must certify that a person trained in asbestos-removal procedures will supervise the demolition or renovation. The supervisor is responsible for the activity on site. Evidence that the supervisor has completed the training must be available for inspection during normal business hours. Please certify the accuracy and completeness of the information by signing and dating the notification form.

<p>In Chelan, Douglas, Kittitas, Klickitat and Okanogan counties, send the notification to:</p> <p>Air Quality Program Department of Ecology, Central Regional Office 15 West Yakima Avenue, Suite 200 Yakima, WA 98902-3401 Phone: (509) 575-2490 Fax: (509) 575-2809</p>	<p>In Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Stevens, Walla Walla and Whitman counties, send the notification to:</p> <p>Air Quality Program Department of Ecology, Eastern Regional Office 4601 North Monroe Street Spokane, WA 99205-1295 Phone: (509) 329-3400 Fax: (509) 329-3529</p>	<p>In San Juan County, send the notification to:</p> <p>Air Quality Program Department of Ecology, Northwest Regional Office 3190 160th Avenue SE Bellevue, WA 98008-5452 Phone: (425) 649-7000 Fax: (425) 649-7098</p>
<p>In any county not listed, contact your local air quality agency for assistance.</p>		

If you need this publication in another format, please call Tami Dahlgren at (360) 407-6800. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.