Please note: Highlighted items cannot be left blank

NOTICE OF DEMOLITION OR ASBESTOS RENOVATION



Florida Department of Environmental Protection Division of Air Resource Management

Department of Regulatory and Economic Resources Environmental Resources Management

701 NW 1st Court, 2nd Floor Miami, Florida 33136-3912

T: 305-372-6925 Fax: 305-372-6954

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MIAMI-DADE

TYPE	E OF NOTICE (CHECK ONE ONLY): OF PROJECT (CHECK ONE ONLY): IF DEMOLITION, IS IT AN ORDERED DEMO IF RENOV ATION:	ORIGINAL DEMOLITION DLITION?	☐ REVISEI ☐ RENOV ☐ YES	ATION	☐ CANCELLATIO ☐ ROOFING ☐ NO	ON COURTESY	
	IS IT AN EMERGENCY RENO VATION	ON OPERATION?	☐ YES			· #	
	IS IT A PLANNED RENO VATION O	PERATION?	☐ YES		□ NO Pro	cess #	
I.	Facility Name						
	Address						
	City			•	•		
	Site			onsultant Insp	ecting Site		
	Building Size	•	# of Floo	ors	Building Age in	Years	
	Prior Use: School/College/Univ	versity \Box Re	esidence	Small Bus	iness Other		
	Present Use: School/College/Univ	versity \Box Re	esidence	Small Bus	iness Other		
II.	Facility Owner				Phone ()	
	Address						
	City		State	Zip			
III.	Contractor' s Name				Phone ()	
	Address						
	City		State				
	Is the contractor exempt from licensure u	under section 469.002	(4), F .S.?	☐ YES	□ NO		
IV.	Scheduled Dates: (Notice must be pos	tmarked 10 working d	la ys before the	project start	date)		
	Asbestos Removal (mm/dd/yy) Start:	Finish:		De	emo/Renovation (mm/d	ld/yy) Start:Finish	:
V.	Description of planned demolition or re	no vation work to be	performed and i	methods to b	e employed, including o	demolition or renovation tech	niques to
	be used and description of affected facili	ty components.					
	Procedures to be Used (Check All That A	(pply):					
	Strip and Removal	Glove Bag		Bullde	ozer	Wrecking Ball	
	Wet Method	Dry Method		Explo	de	Burn Down	
	OTHER:						
VI.	Procedur es for Unexpected RACM:						
	Asbestos W aste Transporter: Name						
•	Address				(
	City			7in			
VIII.	Waste Disposal Site: Name						
•							
	AddressCityCity						
	RACM or ACM: Procedure, including analytical methods, employed to detect the presence of RACM and Category I and II nonfriable ACM.						
IX.	RACM or ACM: Procedure, including an	alytical methods, emu	oloved to detect	the presence	of RACM and Category	I and II nonfriable ACM.	
IX.	RACM or ACM: Procedure, including an	alytical methods, emp	oloyed to detect	the presence	of RACM and Category	I and II nonfriable ACM.	
IX.	Amount of RACM or ACM*	alytical methods, emp	oloyed to detect	the presence	of RACM and Category	I and II nonfriable ACM.	
IX.			oloyed to detect		of RACM and Category	I and II nonfriable ACM.	
IX.	Amount of RACM or ACM*		ployed to detect	_ square feet		I and II nonfriable ACM.	
IX.	Amount of RACM or ACM*square feet surfacing materi	ial	oloyed to detect	_ square feet _ square feet	cementitious material	I and II nonfriable ACM.	
IX.	Amount of RACM or ACM* square feet surfacing materi linear feet pipe	al cy components		_ square feet _ square feet	cementitious material resilient flooring	I and II nonfriable ACM.	
IX.	Amount of RACM or ACM* square feet surfacing materi linear feet pipe cubic feet of RACM off facilit	al cy components		_ square feet _ square feet	cementitious material resilient flooring	I and II nonfriable ACM.	
	Amount of RACM or ACM* square feet surfacing materilinear feet pipecubic feet of RACM off facilit *Identify and describe surfacing material	i <mark>al</mark> cy components I and other materials a	as applicable:	_square feet _square feet _square feet	cementitious material resilient flooring asphalt roofing		
ı	Amount of RACM or ACM* square feet surfacing materilinear feet pipecubic feet of RACM off facilit *Identify and describe surfacing materialcertify that the above information is corre	cy components I and other materials a ect and that an individ	as applicable:	_ square feet _ square feet _ square feet	cementitious material resilient flooring asphalt roofing of this regulation (40 CFF	R Part 61, Subpart M) will be o	
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	Amount of RACM or ACM* square feet surfacing materilinear feet pipecubic feet of RACM off facilit *Identify and describe surfacing material certify that the above information is correlite during the demolition or renovation and during normal business hours. I have read Print Name of Owner/Operator) Signature of Owner/Operator)	cy components I and other materials a ect and that an individed and evidence that the recognitions.	ual trained in the required training dditional inform	_ square feet _ square feet _ square feet e provisions of g has been accountion provide	cementitious material resilient flooring asphalt roofing of this regulation (40 CFF complished by this personnel.)	R Part 61, Subpart M) will be o on will be available for inspec rm.	

DISCLAIMER

This "NOTICE OF DEMOLITION OR ASBESTOS RENOVATION" is required pursuant to the provisions of 40 CFR 61 Subpart M and Rule 62-257.301, F.A.C. and must be submitted prior to any demolition or regulated asbestos abatement activity. This document is an Asbestos Notification only and is not a permit.

This NOTICE OF DEMOLITION OR ASBESTOS RENOVATION does not constitute a waiver of or approval for any federal, state, county, or local permits that may be required for this facility.

INSTRUCTIONS for COMPLETING NOTICE OF DEMOLITION OR ASBESTOS RENOVATION

The state asbestos removal program requirements of s. 376.60, F.S., and the renovation or demolition notice requirements of the National Emission Standards for Hazardous Air Pollutants (NESHAP), 40 CFR Part 61, Subpart M, as embodied in Rule 62-257, F.A.C., are included on this form.

Check to indicate whether this notice is an original, a revision, a cancellation, or a courtesy notice (i.e., not required by law). If the notice is a revision, please indicate which entries have been changed or added.

Check to indicate whether the project is a demolition or a renovation.

If you checked demolition, was it ordered by the State or a local government agency? If so, in addition to the information required on the form, the owner/operator must provide the name of the agency ordering the demolition, the title of the person acting on behalf of the agency, the authority for the agency to order the demolition, the date of the order, and the date ordered to begin. A copy of the order must also be attached to the notification.

If you checked renovation, is it an emergency renovation operation? If so, in addition to the information required on the form, the owner/operator must provide the date and hour the emergency occurred, the description of the sudden, unexpected event, and an explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden. If you checked renovation and it is a planned renovation operation, please note that the notice is effective for a period not to exceed a calendar year of January 1 through December 31.

- I. Complete the facility information. This section describes the facility where the renovation or demolition is scheduled. This address will be used by the Department inspector to locate the project site. Provide the name of the consultant or firm that conducted the asbestos site survey/inspection. For "prior use" check the appropriate box to indicate whether the prior use of the facility is that of a school, college, or university; residence, as "residential dwelling" is defined in Rule 62-257.200, F.A.C.; small business, as defined in s. 288.703(1), F.S.; or other. If "other" is checked, identify the use. Please follow the same instructions for "present use."
- II. Complete the facility owner information.
- III. Complete the contractor information.
- IV. List separately the scheduled start and finish dates (month/day/year) for both the asbestos removal portion of the project and the renovation or demolition portion of the project.
- V. Describe and check the methods and procedures to be used for a planned demolition or renovation. Include a description of the affected facility components. (Note: The NESHAP for asbestos, which is adopted and incorporated by reference in Rule 62-204.800, F.A.C., requires obtaining Department approval prior to using a dry removal method in accordance with 40 CFR section 61.145(3)(c)(i).)
- VI. Describe the procedures to be used in the event unexpected RACM is found or previously nonfriable asbestos material becomes crumbled, pulverized, or reduced to powder after start of the project.
- VII. Complete the asbestos waste transporter information.
- VIII. Complete the waste disposal site information.
- IX. List the amount of RACM or ACM of each type of asbestos to be removed. (Note: A volume measurement of RACM off facility components is only permissible if the length or area could not be measured previously.) Identify and describe the listed surfacing material and other listed materials as applicable.

Notice of Renovation (highlighted items cannot be left blank)

Type of Notice:

- o Original: for submittals up until the first complete notification that is accepted by the DERM
- o Revised: for any revisions after the notification has been accepted by the DERM
- Cancellation: for cancellations prior to the start of the project
- Courtesy: for asbestos abatement on properties not regulated by the NESHAP (e.g., single family residences with no secondary residential structure on the property and not part of a larger project), or for abatement of Asbestos Containing Materials that are not subject to the regulations (e.g., less than 160 sq. ft. combined)

Type of Project: Renovation

- Ordered demolition: Does not need to be checked off
- Renovation:
 - Emergency renovation: Only check off 'yes' if it is a renovation which if not <u>immediately</u> 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.
 - Planned renovation operation: Only check off 'yes' if it is for an annual notification or a notification for a
 project planned for the next calendar year.
- File # / process #: if available

Section I:

- Facility name: Can be address if it is a residential structure (e.g., small apartment building)
- Address/city/state/ZIP/County
- Site: Should be a description of the work site (e.g.: SFR, warehouse, Unit X & Y etc.)
- Consultant inspecting site: Name of the consultant that conducted the asbestos survey
- Building size: should be the size of the building
- # of floors/building age
- Prior use/present use: Should indicate if it has been or is currently used commercially

Section II:

o Facility owner/address/city/state/ZIP/Phone number: All fields should be completed

• Section III:

- Contractor's name/phone/address/city/state/ZIP: This must be a licensed asbestos contractor. TBD cannot be used for these fields.
- Is the contractor exempt from licensure?: This applies to exterior utility (gas, electricity,...) pipe projects only

Section IV:

Asbestos removal (mm/dd/yy) start and finish dates: The earliest start date would be 14 calendar days
 (= 10 working days) after receipt of the notification by the DERM.

 Demo/renovation (mm/dd/yy) start and finish dates: Should be left blank, as this should be reported on a Notice of Demolition

Section V:

- Description of planned renovation (=asbestos abatement) work to be performed: Describe the work to be done, the methods to be used and the area that will be impacted.
- Procedures to be used: Check off the procedures to be used, or write them in the 'other' section.
 Asbestos removal should be done wet unless prior written approval of EPA is obtained and proper emission control methods are used as defined in 40 CFR 61.145(c)(3)(i)(B)

Section VI:

Procedures for unexpected RACM: This is in case Regulated Asbestos Containing Materials are found during the abatement, that were <u>not</u> part of the asbestos survey (for example, multiple layers of vinyl floor tile). Example of possible answers here are to stop the work and have the materials sampled, or stop the work and contact DERM.

Section VII:

 Asbestos waste transporter name/phone/address/city/state/ZIP: This should be the information of the company that will haul the asbestos waste. Can be TBD if not yet determined, but should not be left blank. Can be the contractor if the same company is hauling the asbestos waste.

Section VIII:

Waste disposal site name/address/city/state/ZIP: Location where the asbestos waste will be taken to.
 Can be TBD if not yet determined, but should not be left blank. Asbestos waste materials should be taken to a class I landfill (if within Miami-Dade: Medley landfill or South Dade landfill).

Section IX:

- RACM or ACM: procedures, including analytical methods used to detect presence of RACM/Cat I and II
 nonfriable ACM: Should list the method used to determine if RACM/ACM was detected. E.g.: Asbestos
 survey, lab analysis through PLM.
- Amount of RACM or ACM: Please list the amount of (Regulated) Asbestos Containing Materials that will be abated. E.g.: 1000 sq. ft. resilient flooring
- Identify and describe surfacing material and other materials as applicable: Please describe the (R)ACM materials listed above. E.g., 1000 sq. ft. of vinyl floor tile

Signature:

- Print name of owner/operator: Can be property owner/operator or contractor conducting the work, or an authorized representative (authorization letter required)
- Signature of owner/operator: Can be property owner/operator or contractor conducting the work, or an authorized representative (authorization letter required)
- Date
- Contact phone #