



STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH DEMOLITION / NOTIFICATION FORM

<i>State Use Only</i>
Postmark Date _____
Check #: _____
Transmittal # _____
Record # _____

This form is to be completed and postmarked or hand delivered to the Connecticut Department of Public Health at least ten (10) days prior to the start of demolition as required by the Regulations of Connecticut State Agencies (RCSA), Section 19a-332a-3. In case of emergency notifications, this form is to be completed and postmarked or hand delivered within one (1) working day following the start of demolition. A copy of the written order requiring demolition prepared by a state or local building official shall accompany each emergency demolition notification. Faxed originals are not acceptable. Revisions to the original notification form may be faxed.

Each demolition notification must be accompanied by a fee of twenty-five (\$25) dollars. A check in that amount made payable to "**Treasurer, State of Connecticut**" must be submitted with the notification form. If it is determined that during demolition, asbestos abatement that disturbs more than ten (10) linear or twenty-five (25) square feet of asbestos will occur, then an asbestos abatement notification form shall be filed with the Department of Public Health, in accordance with §19a-332a-3 of the RCSA. This form shall be submitted at least ten days prior to the start of asbestos abatement. *(Please turn over for further instructions.)*

1. TYPE OF NOTIFICATION:

A. NEW ___ B. EMERGENCY ___ C. REVISED ___ ITEMS REVISED _____

2. FACILITY OWNER/OPERATOR:

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: () _____ CONTACT PERSON: _____

3. DEMOLITION CONTRACTOR:

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: () _____ CONTACT PERSON: _____

In accordance with *Section 61.145* of the U.S. Environmental Protection Agency's National Emission Standards for Hazardous Air Pollutants (NESHAPs) regulation, the owner or operator of a facility shall, prior to the commencement of renovation or demolition, inspect the affected portions of the facility for asbestos, including Category I and Category II nonfriable asbestos. An asbestos abatement notification form filed in this situation shall satisfy the filing requirements of the demolition notification.

4. PRE-DEMOLITION ASBESTOS SURVEY CONDUCTED BY:

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: () _____ INSPECTOR DPH LICENSE #: _____

5 (A). **DEMOLITION START DATE:** _____ (D/M/YY)
5 (B). **DEMOLITION COMPLETION DATE:** _____ (D/M/YY)



6. **NAME OF FACILITY:**

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____

7. **USE OF FACILITY:**

A. SCHOOL (K-12) _____ B. PUBLIC BUILDING _____ C. MANUFACTURING _____ D. OFFICE _____
E. COLLEGE _____ F. COMMERCIAL _____ G. CHURCH/SYNAGOGUE. _____ H. RESIDENTIAL _____
OF DWELLINGS _____ I. OTHER _____ (SPECIFY) _____

8. **BUILDING DATA:** _____ SQUARE FEET _____ # OF FLOORS _____ AGE _____

9. **DEMOLITION DISPOSAL FACILITY:**

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____

10. **DEMOLITION WASTE HAULER:**

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____

11. **PERSON COMPLETING THIS FORM:**

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____

SIGNATURE:

DATE:

Further instructions regarding notification

In all cases of demolition, one and only one notification form (either for demolition or for asbestos abatement, as applicable) shall be sufficient to satisfy the DPH regulatory requirements for **demolition notification**. A previously submitted asbestos abatement notification form, filed with the DPH for demolition purposes, shall satisfy the demolition contractor's obligation to notify DPH.