



Office Use Only	
Date Received	
Date Postmarked	
Check No.	
Check Amount	
ASB-	

NOTIFICATION OF DEMOLITION/RENOVATION

This notification must be postmarked or received at the above address in accordance with the notification requirements of Regulation No. 4, Section 4-7 (d)(2). A \$100.00 permit fee must accompany this notification.

1. TYPE OF NOTIFICATION: () Original () Revised () Courtesy () Emergency*
2. TYPE OF OPERATION: () Demolition () Renovation () Ordered Demolition*

* For emergency notifications or ordered demolitions, fill out the appropriate section on the rear of this form.

3. FACILITY INFORMATION: (Identify owner, removal contractor, and other operator)

3a. OWNER			Contact Person		
Address					
City	State	Zip	Telephone	E-Mail	
3b. REMOVAL CONTRACTOR			Contact Person		
Address					
City	State	Zip	Telephone	E-Mail	
3c. OTHER OPERATOR			Contact Person		
Address					
City	State	Zip	Telephone	E-Mail	

4. Is Asbestos Present? () No () Yes

If yes, is it now or will it become friable as a result of the demolition or renovation activities? () Yes () No

5. FACILITY DESCRIPTION: (Include site name, number and floor or room number)

SITE NAME			SITE DESCRIPTION		
Address					
City		State		Zip	
Building Size	No. Of Floors	Present Use		Age in Years	

6. PROCEDURE USED TO DETECT THE PRESENCE OF ASBESTOS-CONTAINING MATERIALS:

- Asbestos Survey (attach copy) Material Assumed to be ACM (attach letter detailing scope of work)

7. REGULATED ACM TO BE REMOVED					8. CATEGORY I NONFRIABLE ACM NOT TO BE REMOVED			
Quantity		Description	Quantity	Description	Quantity		Description	
	LF			LF		LF		
	SF			SF		SF		
	CF			CF		CF		

9. Asbestos Removal Scheduled Dates	Start	Completed
10. Demo/Renovation Scheduled Dates	Start	Completed

11. Scope of Work for Asbestos Removal and/or Demolition:

12. Asbestos Removal/Demolition Work Practices: (Check all that apply)

ASBESTOS REMOVAL

- Containment
- Wet Methods
- Glove Bag
- Strip & Remove
- Other – Explain Below:
- Remove Intact
- Rotating Blade Roof Cutter
- Mechanical Chipping
- Component Removal
- Negative Pressure
- Dry Removal*
* Requires prior written approval from PCD; Attach copy of approval letter.

DEMOLITION

- Bulldozer/Loader
 - Wrecking Ball
 - Implosion
 - Fire Dept. Live Training
- See Item 12 instructions**

13. WASTE TRANSPORTER #1

Contact Person

Address

City

State

Zip

Telephone

WASTE TRANSPORTER #2

Contact Person

Address

City

State

Zip

Telephone

14. WASTE DISPOSAL SITE

Contact Person

Address

City

State

Zip

Telephone

15. If Demolition ordered by a government agency, please identify the agency below:

NAME

TITLE

Authority

Date of Order (MM/DD/YY)

Date Ordered to Begin (MM/DD/YY)

16. For Emergency Renovations

I am applying for an Emergency Renovation permit and a waiver of the 10-day notification period:

- Yes
- No (If Yes, attach letter as described in Instructions for Item 16)

17. 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.

I certify that an individual trained in the provisions of this regulation (40 CFR, Part 61, Subpart M) 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 normal business hours.

(Signature of OWNER/OPERATOR)

DATE

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

(Signature of OWNER/OPERATOR)

DATE

207-00-066 (Rev. 3/16)



**INSTRUCTIONS - NOTIFICATION OF DEMOLITION/RENOVATION
(Form 207-00-066 – Revised 3/16)**

Purpose: This form serves as an application for an asbestos removal permit from the Metro Public Health Department, Pollution Control Division (PCD) and as a National Emission Standards for Hazardous Air Pollutants (NESHAP) notification of demolition and/or renovation in Davidson County, Tennessee. An asbestos removal permit must be obtained and displayed on-site for all asbestos removals involving more than 260 linear feet, 160 square feet, or 35 cubic feet of regulated asbestos-containing material or asbestos-containing material that may become regulated during handling and/or disposal.

1. **Type of Notification:** Indicate whether this is an original notification for a regulated abatement job, a revision to a previously-submitted notification, a courtesy notification, or an emergency abatement job. For an emergency abatement job, Section 16 of the form must be completed.
2. **Type of Operation:** Indicate whether this notification is for a demolition, renovation, or ordered demolition. For an ordered demolition, Section 15 of the form must be completed.

3. Facility Information

- 3a. **Owner:** Fill out the contact information for the individual or entity that owns the property at which the abatement is to take place.
- 3b. **Removal Contractor:** Fill out the company name and contact information for the entity that will be performing the abatement.
- 3c. **Other Operator:** If the property is to be renovated or demolished after abatement, or if any other contractors will be working in areas where the abatement is to take place, enter the company name and contact information in this section. If there will not be any other operators involved in this project, then enter 'None' or 'N/A' in the space for Other Operator.
4. **Is Asbestos Present?:** Indicate whether asbestos is present by checking Yes or No. If asbestos is present, indicate whether the asbestos is now or will become friable during the abatement and disposal process.
5. **Facility Description:** Enter the building name of the facility to be renovated or demolished, a description of the type of building, the physical address, including street number, street name, city, state, and ZIP code. Enter the building size in square feet, number of floors in the building, the present use of the building, and the age of the building.
6. **Procedure Used to Detect the Presence of Asbestos-Containing Materials:** Indicate whether an asbestos survey was conducted, or if the materials to be disturbed or removed have been assumed to be asbestos-containing. If an asbestos survey was conducted, a copy must either accompany this notification or sent by e-mail to air.asbestos@nashville.gov. If the materials to be disturbed or removed are assumed to be asbestos-containing, then a letter clearly detailing the area(s) in which abatement work is to be performed and identifying the types, quantities, and locations of all materials to be removed must accompany this notification.
7. **Regulated ACM to be removed:** List the quantities and types of all asbestos-containing materials (including materials presumed to be asbestos-containing) to be removed during the abatement job.
8. **Category I Non-Friable ACM Not to be Removed:** List the quantities and types of all Category I Non-Friable asbestos-containing materials that will not be removed prior to demolition or renovation.

9. **Asbestos Removal Scheduled Dates:** Enter the asbestos removal start date and the asbestos removal completion date. Start date means the date on which activities which may disturb asbestos-containing materials will begin. **This notification is required to be submitted at least 10 days prior to the start date.**
10. **Demo/Renovation Scheduled Dates:** Enter the dates when demolition and/or renovation are scheduled to start and be completed at the site. **No demolition or renovation activities may begin in the area(s) where abatement is to take place until the Pollution Control Division has been notified and given the opportunity to conduct an inspection.**
11. **Scope of Work for Asbestos Removal and/or Demolition:** Enter a brief description of the asbestos removal and/or demolition work to take place. Indicate which portion of the structure will be affected by abatement and/or demolition activities.
12. **Asbestos Removal/Demolition Work Practices:** Check all appropriate boxes. Provide a complete explanation of work practices to be followed if "other" is checked. **Note:** Dry removal requires prior written approval from the Pollution Control Division. Attach a copy of the written approval to this notification.

For Fire Department Live Training: If the structure is to be demolished by burning as part of a live fire training exercise, all asbestos-containing materials, along with all asphalt roofing and any hazardous materials, must be removed from the structure prior to conducting the exercise. Written approval must also be obtained from the Metro Fire Marshal's Office, and a copy of the approval letter must be attached to this notification.

13. **Waste Transporter #1:** Enter the name, mailing address, including city, state, and ZIP code, contact person, and contact person's telephone number for the waste transporter contracted to transport the waste to an approved landfill.
Waste Transporter #2: If a second waste transporter has been contracted in conjunction with or separately from Waste Transporter #1, enter the contact information for the second waste transporter in the same manner as above.
14. **Waste Disposal Site:** Enter the name and location of the waste disposal site where the asbestos-containing waste will be disposed, including the street address, city, state, and ZIP code, contact person at the waste disposal site, and the contact person's telephone number.
15. **If Demolition Ordered by Government Agency:** Enter the name and title of the person who ordered the demolition, the agency or authority they work for, the date the order was issued, and the date the demolition is ordered to begin. Attach a copy of the order to this notification.
16. **Applying for an Emergency Renovation Permit:** Attach a letter from the owner or operator stating the date and hour the emergency occurred. The letter must have a description of the sudden, unexpected event resulting in the emergency, and an explanation of how the event caused unsafe conditions or would cause equipment damage or would impose an unreasonable financial burden.
17. **Description of Procedures:** Enter a brief description of procedures that will be followed in the event that unexpected asbestos-containing materials are discovered or previously non-friable asbestos-containing materials become friable.

Signature of Owner/Operator: Both lines at the bottom of the form must be signed and dated by the owner or operator of the asbestos removal contractor.

A copy of the Asbestos Waste Manifest must be provided to the Pollution Control Division for each shipment of asbestos-containing waste within 35 days of the date the shipment left the abatement site.