NOTIFICATION OF DEMOLITION

Southwest Clean Air Agency

11815 NE 99th Street, Suite 1294 Vancouver, WA 98682 Voice: (360) 574-3058 Fax: (360) 576-0925 Submit to <u>Tina@swcleanair.gov</u>

(10 day waiting period from date submitted) (Form must be filled out completely)

Notification # 1. TYPE OF NOTIFICATION □ Original □ Revised	Must include fe Notification Fee: Emergency Fee:	\$69.00 \$138.00		Date Received
1. TYPE OF NOTIFICATION □ Original □ Revised				
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2. TYPE OF OPERATION ☐ Partial Demolition ☐ Complete Demolition ☐ Ordered Demolition				
□ Emergency Demolition □ Fire Training			SWCAA	A Reviewed
3. FACILITY DESCRIPTION (Example: Residence, Barr	n, Carport)			
Commercial Name or Description:				
Address:				
City:		State:		County:
Present use:		Prior use:		
4. FACILITY INFORMATION				
Owner Name:		Mailing Address:		
ty: State:				Zip Code:
Contact:			Phone:	
5. NAME AND AHERA CERTIFICATION NUMBER OF A	SBESTOS INSPEC	ΓOR:		
6. ATTACH A COPY OF THE ASBESTOS INSPECTION Report must include laboratory name, analyst, sample typ materials.		as taken and analytical method u	sed to de	etect the presence of asbestos
7. ASBESTOS REMOVAL CONTRACTOR (IF APPLICA	BLE): □ No asbeste	os present, see attached AHER	A Repor	t
Name:		Address:		
City: S	tate:			Zip Code:
Contact:				Phone:
8. DATES ASBESTOS REMOVAL OCCURRED (mm/dd/yy) Start:		Complete:	As	sbestos Case Number:
9. DATES DEMOLITION WILL OCCUR (mm/do	d/yy) Start:	Complete:	_	
10. DEMOLITION CONTRACTOR or FIRE DEPARTMENT:				
Name:				
Address:				
City: S	tate:			County:

Contact and Phone#				
11. DESCRIPTION OF PLANNED DEMOLITION WORK, METHOD(S) TO BE	USED:			
12. FUGITIVE EMISSIONS/DUST FROM DEMOLITION ACTIVITIES MUST B	E CONTROLLED/PREVENTED DURING ALL PHASES OF THE PROJECT.			
13. IF UNEXPECTED ASBESTOS CONTAINING MATERIAL (ACM) IS FOUN CONSULT/HIRE A CERTIFIED ASBESTOS ABATEMENT CONTRACTOR.	D DURING DEMOLITION, STOP WORK, NOTIFY SWCAA AND			
14. IF DEMOLITION IS ORDERED BY A GOVERNMENT AGENCY, PLEASE	IDENTIFY THE AGENCY BELOW:			
Name:	Title:			
Agency:				
Date of Order (mm/dd/yy):	Date Ordered to Begin (mm/dd/yy):			
15. FOR EMERGENCY DEMOLITIONS: (Contact SWCAA prior to work)				
Date and Hour of Emergency (mm/dd/yy) (hh/mm):				
Description of the Sudden, Unexpected Event:				
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE BURDEN: (ATTACH ADDITIONAL PAGE IF NECESSARY)				
16. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.				
(Type or Print Name)	Signature of Owner/Operator) (Date)			

HAVE YOU PERFORMED A HAZARDOUS MATERIALS ASSESSMENT ON THE STRUCTURE? ☐ YES ☐ NO

The Washington State Dangerous Waste Regulations (WAC 173-303) require that demolition debris be evaluated to determine if it is dangerous. The evaluation should be completed before demolition to ensure that hazardous constituents are not released to the environment and do not present a risk to human health during or after demolition. These requirements apply to all buildings being demolished and are the responsibility of the property owner. The Washington Department of Ecology's website, https://ecology.wa.gov/Regulations-Permits/Guidance-technical-assistance/Dangerous-waste-guidance/Common-dangerous-waste/Construction-and-demolition, provides more information about the requirements and about sampling and testing construction materials to determine if they present a risk. For more information please contact a Hazardous Waste Inspector at the Washington Department of Ecology Southwest Regional Office: 360-407-6300.