

## Pinellas County Notification Form ASBESTOS REMOVAL PROJECT Air Quality Division

509 East Avenue South, Ste. 138 Clearwater, Florida 33756

AQA#			

Environmenta Management	al y	Phone	: (727) 464 Asbe	-4422 Fax:  stos@pinellas.g		453-3548		DEP# 		
I.	Check at least one iter	n for each type b				if it applies:				
Notice Type: Original Notice Revised Notice Cancellation On-hold Late Revision Courtesy (<160 SF RACM)										
Project Type:	Asbestos Remo	oval	Phased Project	Emerger	ıcy Rem	noval	Annual (Plar	nned Reno		
Facility Type: NESHAP Applicable School/College/University Residential Exempt (Single building project AND 4 or fewer dwelling units)										
II. Facility Name:							Prior Use:			
Address							Parcel ID:			
City: County: Pinellas						Zip Code:				
Description Affe	cted Area:									
# of Bldgs.	Apt/Condo #s:			Age (Yrs):	# of Rooms: Bldg Size(SF):			Bldg Size(SF):		
III. Start Date:		Finish 1	Date:	Daily Wor			urs: Weekends			
IV. Emission C	ontrols\\Procedu	res\\Amounts	s of Asbesto	s\\Fee (checl	s or co	omplete all	items tha	at apply):		
Wet Method Containment Decon. Neg. Air HEPA Glove Bag Dry Method (prior approval) Encapsulation										
Component Removal Stripping Mechanical Non-Mechanical Trained Rep./Worker Certification Trained Rep./Worker Photo ID										
Procedures used if unexpected RACM is found or created: Stop/Wet RACM/Call Air Quality/Revise Notice										
RACM SqFt	RACM LF (pipe only)	Total SF+ LF	Fee Du	e (SF/LF)	Describe Material					
RACM Cubic Feet Total CuFt Fee Due			ie Cubic Feet	Describe Material						
Estimate amount of when the facility comp the square feet or li calculated.	oonent is missing and									
Total Fee Amount:				Make check payable to "Pinellas County Board of County Commissioners" .						
Category I & II (Non-RACM) CAT I SF			CAT II SF/LF	Describe Material			escribe Material			
Please Note: Only Cat I and II material, which is not expected to be become RACM is quantified and described in this space (Flooring and siding must remain mostly whole; ACM that will be ground, abraded, or chipped is RACM).										
V. Fee Receipt (check one) Mail To: Asbestos Contractor Facility Owner Other (Name and Address attached)										
VI. I certify that all information provided on this form is true and correct to the best of my knowledge.  Signature / Date:										
Print Full Name:										
Signature made by (check one): Asbestos Contractor Facility Owner Other (Name and Address attached)										
Contact Fax #: (			Contact Pl	Contact Phone #:						
Contact e-mail:				Contact Name:						

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VII. Asbestos Consultant:				Consultant Lic.#:			
Asbestos Detection/Analytical Procedures: Thorou	ıgh Asb. Insp./A	Asb. Survey PLN	ı [	Point	Count Other		
VIII. Facility Owner							
Address:							
City:			State:		Zip:		
Contact Name:	Email:			Phone:			
IX. Asbestos Contractor:							
Address:							
City:	City:				Zip:		
Contact Name:				Phone:			
Email:	ail: Lic. #:			This project is exempt from licensure under section 469.004(7) F.S.			
X. Landfill Name:	Class:						
City: County:			: State: Florida				
Contact Name:	Phone:						
Transporter#1: Phone:							
Transporter #2:				Phone:			
Transporter # 3: Phone:							
B. Any Combination; Sq. Ft. & Linear Ft.  0 - 159 square feet 0.00  160 - 420 square feet \$360.00  0 - 259 linear feet \$0.00  260 - 420 linear feet \$350.00  If combination of square feet and linear feet totals >420  421 - 1,000 \$480.00  1,001 - 4,000 \$720.00  4,001 - 7,000 \$960.00  7,001 - 10,000 \$1,200.00  10,001 - 20,000 \$1,320.00  20,001 - 30,000 \$1,460.00  Greater than 30,000 \$1,600.00  C. Asbestos removal in Cubic Feet  0 - 34 \$0.00  35 - 44 \$360.00  45 - 54 \$600.00  55 - 64 \$840.00  65 - 74 \$1,080.00  75 - 84 \$1,320.00  85 - 100 \$1,460.00  Greater than 100 \$1,600.00		<ul> <li>An annual notification is \$360.</li> <li>A late revision to a notification is \$250.</li> <li>After-the-fact notifications are double the normal fee.</li> <li>For phased renovation projects, the fee is based on the amount of asbestos in each phase per the above schedule.</li> <li>Notifications will not be accepted without the appropriate fee.</li> <li>Separate notifications are required for renovations and demolitions.</li> <li>If in the course of a demolition or renovation it is determined that the project belongs in a higher fee category than was initially determined, re-notify Air Quality and pay the balance of the fee for the higher category.</li> <li>For asbestos, which cannot be accurately measured as Sq. Ft. or Linear Ft., use cubic foot measurements; the total fee is derived by adding the cubic foot fee to the Sq. Ft. and Linear Ft. fee.</li> <li>Fee requirements are not applicable when the demolition or asbestos removal project is in a school, college, university, or a residential dwelling, as residential dwelling is defined in Rule 62-257.200, F.A.C.</li> </ul>					