



Pinellas County Notification Form

ASBESTOS REMOVAL PROJECT

Air Quality Division

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

Phone: (727) 464-4422 Fax: (727) 453-3548

asbestos@pinellas.gov

AQA# _____

DEP# _____

I. Check at least one item for each type below, check additional items within a type if it applies:

Notice Type:	Original Notice	Revised Notice	Cancellation	On-Hold	Late Revision	Courtesy (<160 SF RACM)
Project Type:	Asbestos Removal	Phased Project	Emergency Removal	Annual (Planned 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 Affected Area :

# of Bldgs.	Apt/Condo #s:	Age (Yrs):	# of Rooms:	Bldg Size(SF):
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III. Start Date:

Finish Date:

Daily Work Hours:

Weekends

IV. Emission Controls\\Procedures\\Amounts of Asbestos\\Fee (check or complete all items that apply):

Wet Methods Full Containment Neg. Air Press. Decon. HEPA Glove Bag Encapsulation Dry Method (prior approval)

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 Sq Ft	RACM Linear Ft	Total SF+ LF	Fee Due (SF/LF)	Describe Material
RACM Cubic Feet	Total CuFt	Fee Due Cubic Feet	Describe Material	
Estimate amount of RACM in Cubic Feet when the facility component is missing and the square feet or linear feet cannot be calculated.				
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
Please Note: Only Cat I and II material, which is not expected to 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 Phone #: _____

Contact e-mail: _____ Contact Name: _____

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VII. Asbestos Consultant:

Consultant Lic.#:

Asbestos Detection/Analytical Procedures: Thorough Asb. Insp./Asb. Survey PLM/EPA 600 Point Count Other

VIII. Facility Owner

Address:

City: _____ State: _____ Zip: _____

Contact Name: _____ Email: _____ Phone: _____

IX. Asbestos Contractor:

Address:

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Email: _____ 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: _____ 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	\$360.00

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	\$1,440.00
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	\$1,440.00
Greater than 100	\$1,600.00

- An annual notification is \$360.
- A late revision to a notification is \$250.
- After-the-fact notifications are double the normal fee.
- For phased renovation projects, the fee is based on the amount of asbestos in each phase per the above schedule.
- Notifications will not be accepted without the appropriate fee.
- Separate notifications are required for renovations and demolitions.
- 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.
- 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.
- 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.