

SAN JOAQUIN VALLEY UNIFIED AIR POLLUTION CONTROL DISTRICT

☐ **Northern Region Office**
4800 Enterprise Way
Modesto, CA 95356-8718
(209) 557-6400 ♦ FAX (209) 557-6475
(San Joaquin, Stanislaus and Merced Counties)
asbestos.north@valleyair.org

☐ **Central Region Office**
1990 East Gettysburg Avenue
Fresno, CA 93726-0244
(559) 230-6000 ♦ FAX (559) 230-6062
(Fresno, Madera and Kings Counties)
asbestos.central@valleyair.org

☐ **Southern Region Office**
34946 Flyover Court
Bakersfield, CA 93308-9725
(661) 392-5500 ♦ FAX (661) 392-5585
(Tulare and Kern Counties)
asbestos.south@valleyair.org

DEMOLITION PERMIT RELEASE

The purpose of this form is to verify compliance with or exemption from the National Emission Standards for Hazardous Air Pollutants (NESHAP) asbestos **notification** requirements. It is the Applicant's responsibility to obtain the required signature from the District and return this form to the appropriate city or county building department **prior to obtaining a demolition permit**.

Project Description

Job Site Address: _____			City: _____			Zip Code: _____		
Owner's name: _____			Telephone: _____			Fax: _____		
Owner's Address: _____			City: _____			Zip Code: _____		
Contractor's Name: _____			Telephone: _____			Fax: _____		
Contractor's Address: _____			City: _____			Zip Code: _____		
Contact's Email: _____								

1. Structure(s) being demolished:	Yes	No	2. Proposed project:	Yes	No
One structure (non-commercial), with four or fewer units.	<input type="checkbox"/>	<input type="checkbox"/>	Single Family Dwelling	<input type="checkbox"/>	<input type="checkbox"/>
			Subdivision, Retail or Commercial Project	<input type="checkbox"/>	<input type="checkbox"/>
Other (describe): _____			Public Project (School, Highway, etc..)	<input type="checkbox"/>	<input type="checkbox"/>
Is demolition by intentional burning?	<input type="checkbox"/>	<input type="checkbox"/>	Other (describe): _____		

Signature of applicant _____

Title _____

Date _____

FOR SJVUAPCD USE ONLY

☐ This certifies that the demolition applicant has satisfied the APCD's notification requirements. The APCD allows the demolition to proceed on or after _____

☐ This certifies that the Demolition application is exempt from the APCD's requirements.

District approval on this form only indicates compliance with or exemption from the NESHAP notification requirements. Enforcement action will be taken if asbestos NESHAP violations are found at the project.

Further, there are other agencies that regulate the handling and disposal of ACM, such as OSHA, Cal-OSHA, and DTSC regardless of NESHAP applicability to your property.

Comments: _____

Printed Name: _____

Title: _____

Approval Signature: _____

Date: _____