

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"/>
Other (describe):			Subdivision, Retail or Commercial Project	<input type="checkbox"/>	<input type="checkbox"/>
Is demolition by intentional burning?	<input type="checkbox"/>	<input type="checkbox"/>	Public Project (School, Highway, etc..)	<input type="checkbox"/>	<input type="checkbox"/>
			Other (describe):		

Comments: _____

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 _____, 20____.

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: _____