

APPLICATION FOR DEMOLITION PERMIT

**TOWN OF CALLAHAN
BUILDING/ZONING DEPARTMENT
TELEPHONE NUMBER 904-879-3801 FAX NUMBER 904-879-6151**

THE UNDERSIGNED HEREBY APPLIES FOR A PERMIT TO DEMO PROPERTY INDICATED BELOW:

PARCEL ID# _____

DATE: _____ BUILDING PERMIT # _____

NOTE: THE BUILDING PERMIT NUMBER IS REQUIRED IF THE DEMOLITION IS ASSOCIATED WITH ANY CONSTRUCTION OR ALTERNATION WHERE A BUILDING PERMIT HAS BEEN ISSUED AND MUST BE APPROVED BY HDC IF APPLICABLE.

PROPERTY OWNER: _____ PHONE# _____

JOB ADDRESS: _____ SUBDIVISION: _____

TYPE OF STRUCTURE OF DEMO _____

DESCRIPTION OF DEMO _____

COST OF JOB _____

****NOTICE OF OWNER: IT IS THE RESPONSIBILITY OF THE OWNER OR OPERATOR TO COMPLY WITH THE PROVISIONS OF FLORIDA STATUTE 469.002 RELATING TO THE REMOVAL OF ASBESTOS AND TO NOTIFY THE DEPARTMENT OF ENVIRONMENTAL PROTECTION (D.E.P) OF INTENT TO REMOVE ASBESTOS.**

I HEREBY MAKE APPLICATION FOR PERMIT AS OUTLINED ABOVE, AND IF SAME IS GRANTED I AGREE TO CONFORM TO ALL BUILDING REGULATIONS AND ORDINANCES REGULATING SAME AND IN ACCORDANCE WITH PLANS SUBMITTED. THE ISSUANCE OF THIS PERMIT DOES NOT GRANT PERMISSION TO VIOLATE ANY APPLICABLE STATE OF FLORIDA CODES AND/OR ORDINANCES.

CONTRACTOR COMPANY NAME: _____

CONTRACTORS NAME/ ADDRESS/ PHONE # _____

CONTRACTORS SIGNATURE _____

****WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.**



**Florida Department of
Environmental Protection**
Division of Air Resources Management

DEP Form 62-257,900(1)
Effective 2-9-99
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NOTICE OF ASBESTOS RENOVATION OR DEMOLITION

TYPE OF NOTICE (CHECK ONE ONLY): ORIGINAL REVISED CANCELLATION COURTESY

TYPE OF PROJECT (CHECK ONE ONLY): DEMOLITION RENOVATION
 IF DEMOLITION, IS IT AN ORDERED DEMOLITION? YES NO
 IF RENOVATION:
 IS IT AN EMERGENCY RENOVATION OPERATION? YES NO
 IS IT A PLANNED RENOVATION OPERATION? YES NO

I. Facility Name _____
 Address _____
 City _____ State _____ Zip _____ County _____
 Site _____ Consultant Inspecting Site _____
 Building Size _____ (Square Feet) # of Floors _____ Age in Years _____
 Prior Use: School/College/University Residence Small Business Other _____
 Present Use: School/College/University Residence Small Business Other _____

II. Facility Owner _____ Phone (_____) _____
 Address _____
 City _____ State _____ Zip _____

III. Contractor's Name _____ Phone (_____) _____
 Address _____
 City _____ State _____ Zip _____
 Florida License No. _____ Is the contractor exempt from licensure under section 469.004(7), F.S.? YES NO

IV. Scheduled Dates: (Notice must be postmarked 10 working days before the project start date)
 Asbestos Removal (mm/dd/yy) Start: _____ Finish: _____
 Demo/Renovation (mm/dd/yy) Start: _____ Finish: _____

V. Procedures to be Used (Check All That Apply):

<input type="checkbox"/>	Strip and Removal	<input type="checkbox"/>	Glove Bag	<input type="checkbox"/>	Bulldozer	<input type="checkbox"/>	Wrecking Ball
<input type="checkbox"/>	Wet Method	<input type="checkbox"/>	*Dry Method	<input type="checkbox"/>	Explode	<input type="checkbox"/>	Burn Down
OTHER: _____							

*MUST OBTAIN PRIOR DEP APPROVAL BEFORE USING A DRY METHOD

VI. Procedures for Unexpected RACM: _____

VII. Asbestos Waste Transporter: Name _____ Phone (_____) _____
 Address _____
 City _____ State _____ Zip _____

VIII. Waste Disposal Site: Name _____ Class _____
 Address _____
 City _____ State _____ Zip _____

IX. Amount of RACM or ACM

_____ square feet surfacing material
 _____ linear feet pipe
 _____ cubic feet of RACM off facility components
 _____ square feet cementitious material
 _____ square feet resilient flooring
 _____ square feet asphalt roofing

X. Fee Invoice Will Be Sent to Address in Block Below: (Print or Type)

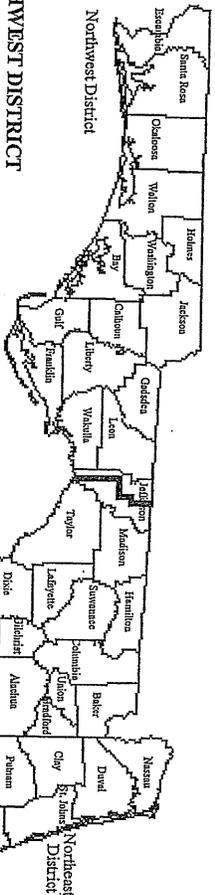
I certify that the above information is correct and that an individual trained in the provisions of this regulation (40 CFR Part 61, Subpart M) will be on-site during the demolition or renovation and evidence that the required training has been accomplished by this person will be available for inspection during normal business hours.

 (Signature of Owner/Operator) (Date)

DEP USE ONLY Postmark/Date Received ID#

FLORIDA Asbestos NESHAPS Contacts

Revised January 5, 2007



DEP NORTHWEST DISTRICT

50/595-8364 FAX 850/595-096
 C 695-8364 FAX SC 695-096
Asbestos Contact: Greg Landry
reg.landry@dep.state.fl.us
 Northwest District Branch Office
 50/872-4375 FAX 850/872-790
 C 777-4375
Asbestos Contact: Richard Brookins
charl2.brookins@dep.state.fl.us
 Northwest District Branch Office
 50/488-3704 FAX 850/922-620
 C 278-3704 FAX SC 292-620

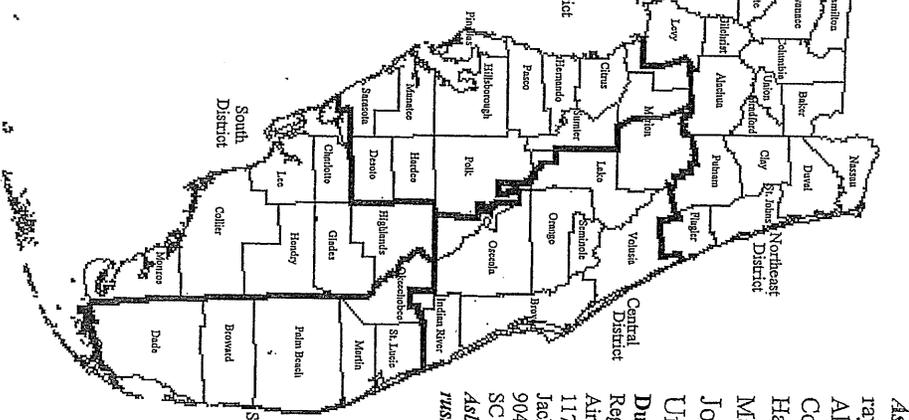
EP SOUTHWEST DISTRICT

3/632-7600 FAX 813/632-68
 : 514-9155 FAX SC 514-23
Asbestos Contact: Neal Janis
nl.janis@dep.state.fl.us
dlm.dahinc@dep.state.fl.us
 Isiborough County
 3/627-2600 ex1260
 : 514-7300 FAX 813/627-60
Asbestos Contact: Robert Delgado
rgdel@epcinc.org
 neilas County
 7/464-4422 FAX 727/453-48
 : 570-4422 FAX SC 570-20
Asbestos Contacts: Mickey Long
ong@pinellascounty.org
 rasota County
 1/861-6220 FAX 941/861-70
 : 549-6233 FAX SC 549-70
Asbestos Contact: John Lowry

DEP SOUTH DISTRICT

239/332-6975 FAX 239/332-6969
 SC 748-6975 FAX SC 748-6969
Asbestos Contacts: Wynne Lewis,
Sherrill Culber
wynne.lewis@dep.state.fl.us
sherrill.culber@dep.state.fl.us
 South District Branch Office
 305/289-2310 FAX 305/289-2314
 SC 464-2310 FAX SC 464-2314
Asbestos Contact: Barbara Nevins
Barbara.nvins@dep.state.fl.us

Southwest District



DEP NORTHEAST DISTRICT

7825 Baymeadows Way, Suite B-200
 Jacksonville, FL 32256-7590
 904/807-3258 FAX 904/448/4363
 SC 804-3258 FAX SC 880-4363
Asbestos Contact: Raymond Baratta,
raymond.baratta@dep.state.fl.us
 Alachua, Baker, Bradford, Clay,
 Columbia, Dixie, Flagler, Gilchrist,
 Hamilton, Jefferson, Lafayette, Levy,
 Madison, Nassau, Putnam, St.
 Johns, Suwannee, Taylor &
 Union Counties
Duval County
 Regulatory and Environmental Services
 Air and Water Quality Division
 117 West Duval Street, Suite 225
 Jacksonville FL 32202-3718
 904/630-1212 FAX 904/630-3638
 SC 986-3484
Asbestos Contact: Kathryn Russell [x3150]
russell@coj.net

DEP CENTRAL DISTRICT

407/893-3333 FAX 407/897-5963
 SC 325-2341 FAX SC 342-5963
Asbestos Contact: Fernan Fletcher
fernand.fletcher@dep.state.fl.us
Orange County
 407/836-1400 FAX 407/836-1499
 SC 356-1400 FAX SC 356-1499
Asbestos Contact: Dale MacLarty,
dale.macLarty@ocfl.net
 Tom Bessa
tom.bessa@ocfl.net

DEP SOUTHEAST DISTRICT

400 North Congress Avenue
 P.O. Box 15425
 West Palm Beach, FL 33416
 561/681-6621 FAX 561/681-6790
 SC 226-6621 FAX SC 226-6790
Asbestos Contact: Karla Kalervo
karla.kalervo@dep.state.fl.us
 Palm Beach County
 561/355-3136 FAX 561/355-2442
 SC 273-3136
Asbestos Contact: Alex Ortega
alexandro_ortega@doh.state.fl.us
 Broward County Environmental Protection
 Department (EPD)
 954-519-1420 Fax 954-519-1495
 Asbestos Contact: Walt Richards
 wrichards@broward.org
Miami-Dade County
 305/372-6925 FAX 305/372-6954
Asbestos Contacts: Bruce Coward, Jorge
Frasces
frasej@miamidade.gov
cowwb@miamidade.gov

ASBESTOS DEMOLITION/RENOVATION PROJECT NOTIFICATION REQUIRED

The National Emission Standard for Hazardous Air Pollutant (NESHAP), regarding asbestos, places a Written Notification requirement on owners or operators (including contractors) engaged in the demolition of any institutional, commercial, public industrial, installation, excluding residential buildings having four or fewer dwelling units, which remain residential. The referenced notification is required to be sent to DEP, Northeast District Air Program, 7825 Baymeadows Way, Suite B200, Jacksonville, Florida 32256-7590 (904) 807-3300 at least (10) working days prior to planned demolition/renovation activity.

Attention:
**Building owners, contractors,
Sub-contractors & consultants**

***RENOVATING OR
DEMOLISHING A
BUILDING ?***

You may be required to have an asbestos survey conducted by licensed asbestos consultant and submit a *Notice of Asbestos Renovation or Demolition* to the Department of Environmental Protection *10 working days* prior to commencement of any renovation and/or demolition activities.

Contact: Ray Barata at (904)-807-3258 or
raymond.barata@dep.state.fl.us

**FAILURE TO COMPLY WITH STATE AND
FEDERAL REGULATIONS MAY RESULT IN
MONETARY PENALTIES.**

Asbestos Fact Sheet Renovation and Demolition

- Notice of Asbestos Renovation or Demolition [DEP Form 62-257.900(1)] is required for all demolitions whether asbestos is present or not.
- Notice of Asbestos Renovation or Demolition must be mailed to:
Florida Department of Environmental Protection
7825 Baymeadows Way, Suite B200
Jacksonville, FL 32256
at least 10 days prior to start of renovation or demolition.
- Demolition means any project that involves at least displacement or removal of any load-bearing member. Burning a building also constitutes demolition.
- Most structures built prior to 1980 have asbestos containing materials in them. These can include floor tiles and adhesives, shingles and siding, roofing, "popcorn" ceiling material, joint compound, insulation, etc.
- If a structure is suspected of having asbestos containing material, a thorough inspection by an asbestos consultant should be required prior to demolition or renovation.
- If asbestos containing material is found above reportable limits an asbestos contractor should properly remove and dispose of the material prior to demolition or renovation.
- Reportable quantities of asbestos containing material are 260 feet on pipes and 160 square feet on other facility components.
- Work on residential homes may be exempt. Call for clarification.
- For asbestos related questions contact Ray Barata at 904-807-3258.

<http://www.dep.state.fl.us/air/pollutants/asbestos.htm>