



DEMOLITION REGULATION 11, Rule 2

Notification Form

For Office Use Only

J# _____
I# _____

Site of Demolition

Site Address: _____ Cross Street: _____
 City: _____ Zip: _____
 Owner/Operator _____ Phone () _____
 Specific Location of Project within Building/Address: _____
 Check One: Single Family Dwelling Commercial Multifamily Dwelling Govt Bldg School

Contractor/Individual Performing Demolition

Name: Company/Individual _____ Contact: _____
 Mailing Address: _____
 City: _____ Zip: _____ Phone: () _____
 Have you previously submitted notifications for other sites? Yes No

Description of Demolition

Is this Demolition by Fire for Fire Training purposes? yes No
 Is this Demolition ordered by a Government Agency? yes No
(Emergency only – attach copy of order)
 If not Demolition for Fire Training, check applicable method:
 Heavy Equipment Implosion By Hand Other _____
 Dates of Demolition: (*Actual* dates must be entered, "ASAP" or "SOON" will be rejected.)
 Start: _____ Completion: _____ Weekend Work? Night Work (*After 5 PM*)?

Asbestos Survey Report

Name of company that conducted survey: _____
 Address: _____
 City: _____ Zip: _____ Phone: () _____
 Name of person who completed the survey: _____ CAC/SST #: _____
 Is /was asbestos present? Yes No
 If yes, who will remove/has removed prior to demo? _____

Form Preparation Information

This form prepared by: _____ Title: _____
 Name: Company/Individual _____ Phone: () _____
 Address: _____ City: _____ State: _____ Zip: _____

See Page Two to Complete This Form

Required Information

Payment must be received before J# will be assigned.

Payment type: Check Cashier's Check Money Order Credit Card* (Visa, MasterCard Only)
(payments, other than credit card payment, must be mailed or delivered to: 939 Ellis St., San Francisco, CA 94109)

I certify that the above information is correct and that I will comply with all of the requirements of the BAAQMD's regulations, as well as all other applicable federal, state and local requirements.

Signature of Contractor or Person Performing Demolition: _____

GENERAL INFORMATION

- ◆ This notification form shall be used to notify the BAAQMD of a **demolition** operation only. Notification is required for every demolition. All boxes must be completed. ***Notification forms may be faxed to (415) 749-4658**, but the **credit card payment form must be faxed separately to (415) 749-4969**. Job numbers will not be issued until applicable fees are received.
- ◆ Notification shall be provided to the District at least 10 working days prior to commencement of demolition, or as early as possible prior to commencement of emergency demolition. The notification period will not start until a complete notification is submitted.
- ◆ An Acknowledgement Letter is mailed to the contractor/individual listed upon receipt of a complete notification. This should be checked for accuracy of data.
- ◆ If the job is postponed or cancelled, the District **must** be notified of a revision; the Acknowledgement Letter should be used to fax or mail the revision information. When cancelled, a cancellation fee will apply.
- ◆ For specific "Emergency" conditions, the 10 working day period will be waived. Notification must be made by fax, and the job number will be issued if accompanied with a faxed copy of a valid check, cashier's check or money order.
- ◆ For residential structures with 4 or fewer units, the 10 working day period may be reduced to 72 hours for an additional fee.

INSTRUCTIONS

- ◆ **SPECIFIC LOCATION OF PROJECT:** Identify where the demolition is taking place if the site contains more than one building.
- ◆ **START AND COMPLETION DATES:** The start date is the date on which demolition of the facility or structure commences. Any revision to the start or completion dates must be submitted prior to the previously notified date(s). Under no circumstances may the revised start date be earlier than the 10th working day following the postmark or fax date of the original notification. If the start date is unknown, enter an estimated start date and revise the notification when the actual start date is known, but not later than the estimated start date.
- ◆ **FIRE TRAINING:** Reg. 11-2-206 includes "intentional burning" in the definition of demolition. Notification is required, the 10 working day requirement must be met and all Asbestos-Containing Material (ACM) >1% must be removed prior to fire training. The District's Open Burning Notification form must also be filed and the applicable requirements of Regulation 5 must be met.
- ◆ **SURVEY REPORT:** See page 3 for survey requirements for your demolition.
- ◆ **GOVERNMENT ORDERED DEMOLITION:** If an "Emergency" demolition (see above) is the result of a state or local agency declaring the building a public nuisance or structurally unsound and in danger of imminent collapse, a copy of the written order must accompany this notification.

FEES APPLICABLE TO DEMOLITION OPERATIONS (FROM REGULATION 3, SCHEDULE L)

Demolition **conducted at a single family dwelling** is subject to the following fee:

OPERATION FEE: \$63

Cancellation: \$63 (100% of fee) non-refundable, for notification processing.

Demolition **conducted at a single family dwelling or multiple family dwelling with four or fewer units with 72 hours instead of 10 days prior notice (excluding emergencies)** is allowed upon payment of the following **additional** fee:

OPERATION FEE: \$437

Demolition, **other than those conducted at a single family dwelling**, is subject to the following fee:

OPERATION FEE: \$262

Cancellation: \$175 of above amount non-refundable for notification processing.

Demolition conducted for the purpose of **fire training** is exempt from fee.

SURVEY REQUIREMENTS FOR DEMOLITION OPERATION (FROM REGULATION 11, RULE 2)

303.8 Surveys: Except for ordered demolitions, prior to commencement of any demolition or renovation, the owner or operator shall thoroughly survey the affected structure or portion thereof for the presence of asbestos-containing material, including Category I and Category II nonfriable asbestos-containing material. The survey shall be performed by a person who is certified by the Division of Occupational Safety and Health, and who has taken and passed an EPA-approved Building Inspector course and who conforms to the procedures outlined in the course. The survey shall include sampling and the results of laboratory analysis of the asbestos content of all suspected asbestos-containing materials. This survey shall be made available, upon request by the APCO, prior to the commencement of any RACM removal or any demolition. This subsection shall not apply if the owner or operator asserts that the material to be renovated is RACM and will be handled in accordance with the provisions of Sections 11-2-303, 304 and 401. The requirement for certification by the Division of Occupational Safety and Health shall not apply to in-house health professionals within a specific nonasbestos related company who perform occasional surveys only for that company as part of their regular job responsibilities

8.1 When a structure, or portion thereof, is demolished under an ordered demolition, the survey must be done prior to, during, or after the demolition but prior to loading or removal of any demolition debris. If the debris contains regulated asbestos-containing material, all of the debris shall be treated as asbestos-containing waste material pursuant to Section 11-2-304.

8.2 For renovation or demolition of residential buildings having four or fewer dwelling units, a survey is not required. A sample and test of the material will be required only when any of the following will be removed or disturbed: heating, ventilation, air conditioning ducting and systems; acoustic ceiling material or acoustic plaster; textured or skim coated wall surfaces, cement siding or stucco, or resilient flooring. Where the material is found to contain greater than 1 percent asbestos and is friable, the material must be handled in accordance with Section 11-2-303.



BAY AREA
AIR QUALITY
MANAGEMENT
DISTRICT

CREDIT CARD PAYMENT FORM
(District accepts Visa and MasterCard ONLY)

Fax this form directly to the District Finance Office at

415-749-4969*

* use a separate form for each job notification

Amount Paid \$ (required) _____

Site Address:			
City:			
Zip :			
Project Description:		<input type="checkbox"/> Demolition	<input type="checkbox"/> Renovation
Removal Amount (of regulated asbestos):	lin ft	sq ft	cu ft

CREDIT CARD INFORMATION:

Name as Appears on Card: _____

Company Name: _____

Card Billing Address: _____

Billing Address Zip Code: _____

Card No: _____

CVV2 Code (3 digit code on reverse side of card) _____

Expiration Date: _____

Authorized Signature (required): _____

Authorized Signature indicates that you are approving the Bay Area Air Quality Management District to charge to your credit card for the amount due and payable as indicated above.

Card holder's phone # (required): _____

Check if you would like a receipt

Fax # or email address: _____