ASBESTOS ABATEMENT PROJECT NOTIFICATION FORM

An asbestos abatement contractor intending to engage in an asbestos abatement project in Nevada is required to submit a Notification Form and fees, which must be received by mail at the Division 10 days before beginning any on-site work at the asbestos abatement project. FAXES WILL NOT BE ACCEPTED FOR ORIGINAL NOTIFICATIONS. (If revising original notification, please send only page 1 of Notification Form).

PART A GENERAL INFORMATION

1. **Name of Contractor:** ____________________________________________

   Mailing Address: ______________________________________________________

   City: __________________________ State: __________ ZIP: __________

   Contact Name: ______________________ Phone No: __________________

2. **Name of the Building Owner:** __________________________________________

   Owner’s Address: ______________________________________________________

   City: __________________________ State: __________ ZIP: __________

3. **Description of the Building/Structure:**

   Building/Structure Address: _____________________________________________

   City: __________________________ State: __________ ZIP: __________

   Building Age (Years): __________ Usage of Bldg.: __________________________

   Building Size: Total Floor Space (Square Feet): ________________ No. of Floors: __________

PART B DESCRIPTION OF PROPOSED ASBESTOS PROJECT

1. **Project Type:** ____________________________________________

2. **Project Schedule:** Start Date: ______________ Finish Date: ______________
3. Amount of ACM Affected: _______________ SQ. FT. _______________ LN. FT.

4. Description of ACM Type and Nature: _______________________________________________________________

5. Containment Measures and Work Practices: (Be Specific) _______________________________________________

__________________________________________________________

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PROJECT NOTIFICATION FEES: (NOTE: No project notification form is complete until the project notification fee is received by the Division. The maximum project notification fee required to be paid in any calendar year by a building owner is $2,000.) Send check or money order made payable to the Division of Industrial Relations.

$100 For each project greater than 10 sq. ft. or 25 ln. ft., and less than 160 sq. ft. or 260 ln. ft.

$400 For each project greater than 260 ln. ft. or 160 sq. ft. and less than 2600 ln. ft. or 1600 sq. ft.

$1,000 For each project greater than 2600 linear feet or 1600 square feet.

PART C FINAL CLEARANCE

1. Project Monitor: (Name of Consultant who will provide the final clearance for the project). Name and Nevada License No. of each Consultant on the project:

   Name                                      OSHES License No.

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

   Name of Firm: __________________________________________ Phone No. ______________________

   ________________________________________________________________

2. Will the Project Monitor also provide employee exposure monitoring for the project?

   Yes __  No __

3. Will the Project Monitor perform on-site asbestos analysis?

   Yes ____  No ____

4. Project Designer: (Name of Consultant who will perform Project Design activities.)

   Name                                      OSHES License No.

   ________________________________________________________________

   ________________________________________________________________
Name of Firm: ____________________________ Phone No: ____________________

PART D WASTE DISPOSAL

1. Name and Address of Hauler/Waste Transporter:
   Name: _________________________________ License No: ________________
   Address: ________________________________________________________

2. Name and Location of approved asbestos waste disposal site(s):
   Operator: _______________________________________________________
   Location: _______________________________________________________

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