

PLEASE MARK APPROPRIATE BOX

- New Project
- Revise, Project # _____
* Revision Changes
- _____
- _____
- Courtesy Notification

Nevada Department of Business and Industry
 Division of Industrial Relations
 Occupational Safety and Administration

Southern District Office
 1301 N. Green Valley Pkwy
 Suite 200
 Henderson, Nevada 89074
 Phone: 702-486-9020
 FAX: 702-990-0360

Northern District Office
 4600 Kietzke Lane
 Building F, Suite 153
 Reno, Nevada 89502
 Phone: 775-824-4600
 FAX: 775-688-1378

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)** _____

OSHES Form ACP-5b

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:
- | | |
|-------------|--------------------------|
| <u>Name</u> | <u>OSHES License No.</u> |
| | |

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.)
- | | |
|-------------|--------------------------|
| <u>Name</u> | <u>OSHES License No.</u> |
| | |

Name of Firm: _____ Phone No: _____

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PART D

WASTE DISPOSAL

1. Name and Address of Hauler/Waste Transporter:

Name: _____ License No: _____

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Address: _____

__2. Name and Location of approved asbestos waste disposal site(s):

Operator: _____

—
Location: _____
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