

Notification, Project Log & Occupant Protection Plan

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Department of Health Services

Asbestos Project Notification



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DEPARTMENT OF HEALTH SERVICES
Division of Public Health
F-00041 (5/09)
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STATE OF WISCONSIN
Bureau of Environmental & Occupational Health
DHS 159, Wis. Adm. Code

ASBESTOS PROJECT NOTIFICATION

Completion of this form is mandatory for regulated asbestos projects under ch. DHS 159, Wis. Adm. Code. This form may not be used to meet the notification requirements for the Department of Natural Resources, chs. NR 406, 410, and 447. Refer to page 2 and the instructions for help completing and submitting notification. **Shaded areas are for Department use only.**

Each project must have a unique Project #

Company project No. []	Submitted	DHS No.
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PROPERTY INFORMATION

Property type (check most accurate response) Commercial/Industrial/Business Public (church, library, etc.) K-12 School
 Government University Residential/No. Units [] [Owner-occupied Rental] Other: []

Facility/building name, if applicable
[]

Property contact person []	Telephone No. ([]) [] - []
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Name of owner []	Telephone No. ([]) [] - []
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Street or fire code address []	City []	Zip [] - []
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Location of project on premises
[]

This is particularly important in large facilities

ASBESTOS PROJECT TYPE Check all that apply

Removal Enclosure Encapsulation Repair Other (describe):

Structure will be: Occupied Vacant (If occupied, complete and post an Asbestos Occupant Protection Plan, Form F-44016)

NOTICE TYPE

Original Cancellation Revision, No. [] Revising: Schedule Type/amount of ACM Other: []

Planned renovation project Start date(mm/dd/yy): [] End date: [] Sub-project No: []



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* 'Working day' means any day except Saturday or Sunday. For notification purposes a working day ends at 4 p.m.

Cancellations: Submit asbestos project cancellation before the start date on the original or most recently revised notice for the project by one of the following means: fax, email attachment, or personal delivery as provided under Delivery Methods.

Delivery methods: Use one of the following methods for delivery, as allowed, based on the information provided above:

- Fax: submit notification form with credit card payment form to 608-266-9711
- Email: submit notification form with credit card payment form to dhsAsbestosLead@wi.gov
- Personal delivery: submit notification form and payment to street address
- Delivery service with guaranteed delivery schedule: send notification form and payment to street address
- U.S. postal service (must be postmarked 4 working days or more before project start): mail notification form and payment to mailing address

<p>Mailing Address</p> <p>Department of Health Services Asbestos and Lead Section, Room 137 P.O. Box 2659 Madison WI 53701-2659</p>	<p>Street Address</p> <p>Department of Health Services Asbestos and Lead Section 1 West Wilson Street, Room 137 Madison WI 53703</p>
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Call (608) 261-6876 with questions.

PAYMENT METHODS – Payment is required at the time notice is submitted. See Instructions Page 2 for information on determining fees.

- For notification submitted by fax or email, fee is payable only by credit card (Visa or MasterCard only) using the credit card payment form.
- For notification submitted by personal delivery, delivery service, or U.S. postal service, fee is payable by credit card, check, or money order.
- Cash is not accepted.

<p>DEPARTMENT OF HEALTH SERVICES</p> <p>Division of Public Health F-00041 (5/09) Instructions Page 3 of 4</p>	<p style="text-align: right;">STATE OF WISCONSIN</p> <p style="text-align: right;">Bureau of Environmental & Occupational Health DHS 159, Wis. Adm. Code</p>
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Instructions for Completing Asbestos Project Notifications

Each section on the notification form must be completed. The form must be signed and dated by an authorized representative of the asbestos company conducting the project, or electronically signed and dated by the authorized representative.

Company project number – Assign a unique project number. This project number must be included on any revised or cancelled notice.

PROPERTY INFORMATION – Complete the information requested about the property where the project will be conducted. Provide information needed to locate the actual asbestos project worksite on the property. Enter for 'Property Contact Person' the owner, owner

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Residential. Single-family or multi-family dwelling, apartment, condominium, loft, dormitory or other facility where any person resides. Include the total number of dwelling units in the structure and check whether the property is owner-occupied or rental.

Other. Any other type of building or structure, including facilities such as: water towers, bridges, tunnels, parking structures.

ASBESTOS PROJECT TYPE – Check all boxes that apply.

Removal. Activity that takes out any or all ACM or suspect ACM in or on a structure or takes out any or all structural components that contain or are covered with ACM or suspect ACM.

Enclosure. Activity that creates an airtight, impermeable, permanent barrier over or around ACM.

Encapsulation. Activity that treats ACM with a product specifically designed to surround or embed asbestos fibers in an adhesive matrix.

Repair. Activity that returns damaged ACM to an undamaged condition or to an intact state.

Other. Activity not covered by standard abatement activities, such as chemical or mechanical conversion.

Occupancy: Check the box that best describes the occupancy status of the structure during the asbestos activity. Check 'Occupied' if any part of the attached structure will be occupied by persons or furnishings. Check 'Vacant' if the structure will be empty of both occupants and furnishings for the duration.

Note: If the structure will remain occupied or furnished during the asbestos activity, an Occupant Protection Plan, Form F-44016 must be completed and posted in plain view outside each regulated area.

NOTICE TYPE – Check appropriate box for original, cancellation, revision, planned renovation project or sub-project notice.

Original. Provides first written notice for a project.

Cancellation. Cancels a project already notified. Once cancelled, a notice can not be reactivated. If a project is re-scheduled after being cancelled, a new notice with fee is required.

Revision. Changes information on a previously submitted project notice. Enter the number of the revision in the space provided, (the first revision is Revision No. 1). Check box or boxes to indicate what information is being revised, the schedule, type or amount of ACM, or other (please describe). Circle all changed information on the notice form.

- For a later start date, submit before the start date on the original notice.
- For an earlier start date, submit at least 2 working days before the revised start date. Revised notice submitted less than 2 working days before the new start date shall include a \$50 fee.
- For an earlier end date, submit as soon as known.
- For a later end date, submit before the project end date on the previous notice.
- A notice may not be revised after the project end date provided on the previous notice. A new original notice with fee must be submitted.

Planned Renovation Project. Provides notice for a planned renovation project expected to include a series of asbestos abatement activities conducted within a given time period not to exceed one year.

- Notice shall be submitted at least 2 working days before the start of the planned renovation project.
- Provide the renovation project start and end dates, not to exceed 12 months in length.

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- Check the box or boxes for the types of material - pipes/ducts, surfacing, or other friable ACM.
- If 'other' is checked, describe the material.

Non-Friable.

- Check the box or boxes for the types of materials -flooring, roofing, siding, or other non-friable ACM
- If 'flooring' or 'roofing' is checked, also check whether manual or mechanical methods will be used.
- If 'other' is checked, describe the material.

Amount of Asbestos. In column 2 enter the total amount of ACM to be abated in linear, square or cubic feet. Use cubic feet only if unable to describe amount in linear or square feet. Use the guidance tables on page 2 of the form to determine if notification is required to DHS. Notification may be required to DNR. Contact DNR at 608-266-2060 for information on DNR notification requirements.

FEES - Determine the notification fee, if any. Check the 'No fee required' box if the project does not require a fee (see 'revised notice and 'planned renovation project and sub-project notices' below for cases where no fee is required). Note: A 'working day' means any day except Saturday, Sunday, or state or federal holidays. Notices submitted after 4:00 p.m. are considered submitted the next working day.

Original notice:

- \$50** for an original notice submitted 2 working days or more before the project start date.
- \$100** for an original notice submitted less than 2 working days before the project start date.

Revised notice:

- \$50** when a revision to an earlier start date is submitted less than 2 working days before the new start date.
- No fee** is required for any other revision.

Planned Renovation Project and Sub-Project notices:

- \$100** for a planned renovation project notice.
- \$50** for a sub-project notice submitted less than 2 working days before the start date of the sub-project.
- No fee** is required for a sub-project notice submitted 2 working days or more before the start date.

Completing the fee section.

- If no fee applies, check the 'No fee required' box.
- If a fee applies, check the box that best describes the notification: original, sub-project, revision or planned renovation.
- Check the appropriate fee amount in the **Fee Enclosed** column.
- attach the fee: credit card, check, or money order depending on the delivery method. See the notice form Page 2 for more on payments.

PROJECT NOTIFICATION AFFIDAVIT – The notification form must be signed by an authorized company representative who can vouch for the accuracy of the information provided.

REVISIONS - Whenever information for a project changes, submit a revised notice to the department on a copy of the original notice. To complete the revised notice, be sure the original project number is clearly identified; in the 'Notice Type' section of the form check 'Revision'

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What is required on regulated site:

- DHS 159.21 Responsibilities when conducting asbestos abatement
 - (2) Project Log
 - (3) Occupant Protection Plan

When to Use:

- In all regulated areas:

DHS 159.04(45)

(45) "Regulated area" means an area where an **asbestos abatement activity** is conducted, and adjoining areas where debris and waste from the asbestos abatement activity accumulate.

When to Use:

- DHS 159.04(4)

(4) "Asbestos abatement activity" means any activity that disturbs asbestos-containing material, including but not limited to, the repair, enclosure, encapsulation, or removal of asbestos-containing material and the repair, operation, service, maintenance, renovation or demolition of any part of a facility where asbestos-containing material or suspect asbestos-containing material is present, including all associated set up of work-site containment, clean-up and loading-out of asbestos-containing material for disposal and any air sampling or air monitoring conducted before, during or after the activity to determine that the containment or regulated area is intact or that clean-up is complete and the containment or regulated area can be disassembled.

Project Log

■ **DHS 159.21 (2) PROJECT LOG.** The company shall:

- Maintain a project log onsite for each workday of an asbestos abatement activity.
- Include: date, project number as identified on the notification form, project address, printed name and certification number of the site supervisor, and the printed name, signature, reason for entry, department certification number
- In and out times for each person who enters the regulated area.

Occupant Protection Plan

■ DHS 159.21 (3)

- “shall be posted in **PLAIN** view outside each regulated area when the structure on which the asbestos abatement activity is being conducted is occupied or furnished....”

ASBESTOS OCCUPANT PROTECTION PLAN

This occupant protection plan shall remain posted for the duration of the asbestos project.
Only certified persons using appropriate personal protection may enter regulated areas.

Contractor - Describe the actions taken to ensure the health and safety of building occupants during this project in space below. If handwritten, write clearly and legibly. Post this plan in plain view outside the regulated area for the project.

Occupants - Asbestos is a hazardous substance. The actions described below are meant to protect you and others nearby during this asbestos removal project. It is important to stay out of work areas while work is in progress and until permission is given to re-enter upon completion. The contractor will do daily clean-up, but the regulated work area may still contain dangerous levels of asbestos until final cleaning is completed.

ASBESTOS COMPANY INFORMATION

Company Name		DHS company No.	
Address	City	State	Zip Code
Company Contact Person		Telephone No. ()	

ASBESTOS PROJECT INFORMATION

Property Type or Property Name		
Address		City
Property Contact Person		Telephone No. ()
Project start date (mm/dd/yy)	Project end date (mm/dd/yy)	Project work shifts <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/> night

PROJECT DESCRIPTION (Type of project, including type and amount of asbestos-containing material)

PROTECTIVE MEASURES (Describe below actions taken to ensure occupant safety - attach additional sheet, if needed)

Containment or barrier system (including negative air system, glovebag, full containment, mini-containment, etc.)

Ventilation system shutdown

Work practices (such as wet methods, debris-lowering system, waste handling)

Final cleaning and clearance description (such as air scrubbing, HEPA vacuuming, wet cleaning, encapsulant, air sampling)

DEPARTMENT OF HEALTH SERVICES - ASBESTOS PROGRAM CONTACT

Asbestos and Lead Section (608) 261-6876

Occupant Protection Plan

ASBESTOS COMPANY INFORMATION

Company Name Department of Health Services - Wisconsin		DHS company No. 23430	
Address 1 W Wilson St, Rm 137	City Madison	State WI	Zip Code 53701
Company Contact Person Asbestos Supervisor		Telephone No. (608) 261-6876	

ASBESTOS PROJECT INFORMATION

Property Type or Property Name Residential		
Address 123 Asbestos Lane	City Portage	
Property Contact Person Owner of property	Telephone No. phone number of property owner ()	
Project start date (mm/dd/yy)	Project end date (mm/dd/yy)	Project work shifts <input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/> night

Occupant Protection Plan

PROJECT DESCRIPTION (Type of project, including type and amount of asbestos-containing material)

Asbestos removal of 182 linear feet of Class 1 friable material

Occupant Protection Plan

PROTECTIVE MEASURES (Describe below actions taken to ensure occupant safety – attach additional sheet, if needed)

Containment or barrier system (including negative air system, glovebag, full containment, mini-containment, etc.)

mini containment using multiple glovebag for straight line pipe. For elbow joints located in crawl space- using full containment with negative air system

Ventilation system shutdown

Ventilation system shutdown, secured, and signage posted of danger

Work practices (such as wet methods, debris-lowering system, waste handling)

Will use wet methods of removal while using glovebag and full containment. Waste will be decon'd before leaving work area and waste will be doubled bagged with a goose necked fully taped. Coordinated with landfill that accepts RACM for proper disposal.

Final cleaning and clearance description (such as air scrubbing, HEPA vacuuming, wet cleaning, encapsulant, air sampling)

Final cleaning will be HEPA vacuuming, wet method cleaning and air sampling by a independent third party - Breath Right Company, LLC

Record Keeping

- DHS 159 (7) (a) ...An asbestos company shall retain all records related to its asbestos abatement or management activities for at least 3 years after the documents are created or received by the company.....

Record Keeping Cont.

- The company shall retain all of the following records....
 - Copies of notifications
 - Project logs
 - Occupant protection plans
 - Written contracts
 - Inspection reports
 - Documentation of annual training

Any Questions??

