

City of El Centro
Building and Safety Department
1275 W. Main St., Ph. (760) 337-4508

ASBESTOS NOTIFICATION STATEMENT FORM

Demolition Project Location Site: _____

Assessors Parcel Number: _____

Pursuant to Section 19827.5 of the California Health and Safety Code, ALL Demolition Permit applicants are required to fill out this form.

“SECTION 19827.5; A DEMOLITION PERMIT SHALL NOT BE ISSUED BY ANY CITY, COUNTY, CITY AND COUNTY, OR STATE OR LOCAL AGENCY WHICH IS AUTHORIZED TO ISSUE DEMOLITION PERMITS AS TO ANY BUILDING OR OTHER STRUCTURE EXCEPT UPON THE RECEIPT FROM THE PERMIT APPLICANT OF A COPY OF EACH WRITTEN ASBESTOS NOTIFICATION REGARDING THE BUILDING THAT HAS BEEN REQUIRED TO BE SUBMITTED TO THE UNITED STATES ENVIRONMENTAL PROTECTION AGENCY OR TO A DESIGNATED STATE AGENCY, OR BOTH, PURSUANT TO PART 61 OF TITLE 40 OF THE CODE OF FEDERAL REGULATIONS, OR THE SUCCESSOR TO THAT PART. THE PERMIT MAY BE ISSUED WITHOUT THE APPLICANT SUBMITTING A COPY OF THE WRITTEN NOTIFICATION IF THE APPLICANT DECLARES THAT THE NOTIFICATION IS NOT APPLICABLE TO THE SCHEDULED DEMOLITION PROJECT. THE PERMITTING AGENCY MAY REQUIRE THE APPLICANT TO MAKE THE DECLARATION IN WRITING, OR IT MAY INCORPORATE THE APPLICANT’S RESPONSE ON THE DEMOLITION PERMIT APPLICATION. COMPLIANCE WITH THIS SECTION SHALL NOT BE DEEMED TO SUPERSEDE ANY REQUIREMENT OF FEDERAL LAW.”

As applicant, I certify that; I have read the excerpt from Section 19827.5 of the Health and Safety Code provided above; the information I have provided on this form to be true and correct; and I further certify the follow:

Attached is a copy of the *Asbestos NESAHP Notification of Demolition and Renovation* which I have sent both to the US Environmental Protection Agency of California and the California Air Resources Board.

Signature of contractor or property owner: _____
Date: _____

OR

I hereby declare that a written asbestos notification to the US Environmental Protection Agency is not applicable for this demolition project.

Signature of contractor or property owner: _____
Date: _____