



1600 South Second Street  
Mount Vernon, WA 98273-5202  
ph 360.428.1617  
fax 360.428.1620  
[www.nwcleanair.org](http://www.nwcleanair.org)

## INSTRUCTIONS FOR FILING APPLICATION FOR RESIDENT-OWNER ASBESTOS PROJECT

Asbestos is a hazardous, fibrous mineral used in over 3000 building materials that can be released to the breathing zone during renovation/demolition activities to lodge deep in your lungs and cause permanent negative health effects. That is why the Washington Administration Code and the Northwest Clean Air Agency (NWCAA) regulate the removal of asbestos. This form is provided for homeowners who choose to remove asbestos-containing building materials from their own homes, which they occupy, the only exception to State rules requiring use of Certified Asbestos Abatement Contractors for asbestos projects. **Landlords must not disturb asbestos in rental properties.** It is our goal to provide you with information so that you will handle this material safely.

The NWCAA Regulation Section 570 requires that NWCAA be notified in advance on this form of all asbestos abatement projects or demolitions involving owner-occupied, single family residences. This Regulation can be found on our Web Site: [www.nwcleanair.org](http://www.nwcleanair.org).

Mail or deliver this application with a \$25 processing fee to the Northwest Clean Air Agency at 1600 South Second Street, Mount Vernon, WA 98273-5202. **A copy stamped "received" will be returned to you promptly.** This will also be your permit for disposal. A copy must accompany the asbestos waste when deposited at a waste disposal site.

Please call our office prior to removing asbestos. A brief conversation regarding your project will ensure your project, is as safe, easy, and cost-effective as possible (360) 428-1617.

Quantity to be removed: please estimate the square footage or linear feet for pipe work.

Project starting date and completion date: Application must be received prior to starting the project.

Site Address: This is where the project will take place.

Has material to be removed been sampled and analyzed: NWCAA can provide a list of companies that can analyze material to see if it contains asbestos or look in your phone book under Asbestos Consulting and Testing.

Type of material to be removed: Check what you know to have asbestos. NWCAA can provide information on how to find common asbestos-containing areas and how to remove asbestos safely.

Control measures and personal protection equipment: Please check the equipment you will be using. If you would like information on equipment that will help you safely remove asbestos, please contact the NWCAA.

Asbestos disposal site: If you would like a list of waste facilities that accept properly packaged asbestos waste, please contact our office.

This is not an approval but a permit. You are responsible for the accuracy of the information provided to the NWCAA. This form must be taken with you when you take your asbestos to an approved waste site. If you have any questions, please call 360-428-1617.



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## Application for Resident-Owner Asbestos Project

Agency Use Only

CASE #:

Instructions for completing this form are on the back.  
Please type or print clearly.

ENCLOSE \$25 PROCESSING FEE

AGENCY USE ONLY  
NARS NUMBER

✓ **Clearly print your name and mailing address below**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Name of Person Conducting Removal:

Daytime Ph #:

Evening Ph. #:

Quantity to be removed/encapsulated: \_\_\_\_\_ (sq. ft.) (linear ft. -for pipe work only)

Project starting date: \_\_\_\_\_ Completion date: \_\_\_\_\_

Is this building scheduled for demolition? ☐ Yes ☐ No

Site address: **THIS MUST BE COMPLETED** (Attach a brief explanation if site address is different from mailing address.)

Street City Zip code County

Has material to be removed been sampled and analyzed? ☐ Yes ☐ No

If No, Please explain \_\_\_\_\_

Facility type (check all that applies):  
☐ Single Family ☐ Two or more units  
☐ Non-Owner Occupied ☐ Owner Occupied

Type of material to be removed/encapsulated:  
☐ Cement Asbestos Board ☐ Duct/Furnace Wrap ☐ Boiler Insulation ☐ Mag. Pipe Insulation  
☐ Other Pipe Insulation ☐ Stucco ☐ Plaster ☐ Other (specify) \_\_\_\_\_  
☐ Popcorn Ceiling ☐ Sheet Vinyl Flooring ☐ Vinyl Asbestos Tiles

Is removal: ☐ Indoors ☐ Outdoors

Control measures & Personal Protection Equipment:

☐ ½ Face Respirator ☐ Disposable Coveralls ☐ Eye Protection ☐ Disposable Gloves ☐ Wetting  
☐ Rubber Boots ☐ Plastic to Contain Debris ☐ Wrap & Cut (Pipe Removal) ☐ Other (specify) \_\_\_\_\_

Briefly describe your method of removal: \_\_\_\_\_

Asbestos disposal site: \_\_\_\_\_

I CERTIFY THAT I AM THE OWNER OF THIS RESIDENCE AND THAT THE ABOVE  
FORMATION IS CORRECT.

Signature

Date

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This form is required when you dispose of  
asbestos.

This stamped copy is your permit



Serving Island, Skagit & Whatcom Counties

## ASBESTOS DISPOSAL INFORMATION

*January 2010*

The following is a list of asbestos disposal options within Island, Whatcom and Skagit counties. **All disposal sites will require a copy of the Northwest Clean Air Agency's (NWCAA) asbestos abatement or demolition permit to accompany waste deliveries.** See reverse of this page for disposal sites out of NWCAA's jurisdiction that accept asbestos waste from all Washington counties.

COUNTY	DISPOSAL SITE	RESTRICTIONS/REQUIREMENTS
<b>ISLAND/ SKAGIT / WHATCOM COUNTIES</b>	<b>Environmental Abatement Services (EAS)</b> 18365 W. Lincoln Street Mount Vernon, WA 98273 (360) 755-1085 (phone) (360) 755-5145 (fax)	EAS is a local asbestos contractor willing to pick up or accept delivery of properly wrapped asbestos waste from residential work sites. Call for a price quote per cubic yard. 40 pounds maximum per unit waste.
<b>ISLAND/SKAGIT COUNTIES</b>	<b>Landfills closed.</b>	Use a hauler (above) or haul the waste yourself to RDC listed below or to landfill options listed on back of page.
<b>ISLAND/SKAGIT/ WHATCOM COUNTIES</b>	<b>Recomp of WA, Inc. also known as Regional Disposal Company (RDC)</b> 1524 Slater Road Ferndale, WA 98248 (360) 384-1057	Signed waste packaging form, provided by RDC or NWCAA. 24-hours prior notice of delivery. 40 pounds maximum per unit waste. Waste authorization form to be completed at landfill.  Fee: \$150 per ton, \$80 minimum.



**ASBESTOS DISPOSAL INFORMATION:**  
**Outside of the Northwest Clean Air Agency's (NWCAA) Jurisdiction**

**DISPOSAL SITE**

**Eastmont Transfer Station**

7155 W. Marginal Way SW  
Seattle, WA  
(360) 428-1617  
(206) 762-3000  
(206) 762-6124

**Rabanco Recycling Company**

2733 3rd Avenue S.  
Seattle, WA  
(360) 428-1617  
(206) 623-4080

**Seattle Disposal Company**

waste 54 S. Dawson Street  
waste Seattle, WA  
(206) 763-2800  
(360) 428-1617

**Hidden Valley Landfill**

17295 Meridian  
Tacoma, WA  
(360) 428-1617  
(253) 847-7555  
(253) 591-6572 – Tacoma

**Kitsap County Landfill**

1015 SW Barney White Road  
Port Orchard, WA  
(206) 674-2331

**RESTRICTIONS/REQUIREMENTS**

Asbestos waste from all counties and cities.  
Call for appointment.  
NWCAA asbestos removal or demo permit

Waste authorization form/log to be completed at  
transfer station.

Asbestos waste from all counties and cities.  
Call for instructions.  
NWCAA asbestos removal or demo permit

Waste authorization form/log.

Site is not a landfill, but it accepts asbestos  
from all counties and cities. They then haul  
to a landfill. Container renting/hauling only.  
NWCAA asbestos removal or demo permit  
Waste authorization form/log.

Asbestos waste from all counties and cities.  
24-hours prior notice.  
NWCAA asbestos removal or demo permit

Health Department permit/waste authorization  
form/fee.

Asbestos waste from all counties and cities.  
24-hours prior notice.  
NWCAA notification form - (360) 428-1617  
Waste authorization form/log to be filled out at  
landfill.



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## **INSTRUCTIONS**

### **FILING A WRITTEN NOTICE OF INTENT TO PERFORM AN ASBESTOS PROJECT**

Written notice required by NWCAA Regulation Section 570 must be submitted on this form. If this notice is submitted by mail, the appropriate fee must be enclosed. A copy of your notice must accompany the asbestos waste when deposited at a waste disposal site. The required "Advance Notification Period" begins on the day that a properly completed notice and appropriate fee is received.

**NOTE: FOR ALL AMENDMENTS TO THIS APPLICATION, USE AMENDMENT TO NOTICE OF INTENT TO PERFORM AN ASBESTOS PROJECT .**

#### **TYPE OF PROJECT**

Check the applicable box that pertains to your type of asbestos project.

#### **PROJECT CATEGORY**

Check the applicable box that indicated your project category, Advance Notification Period and Notification Fee. Residential projects must be confined to occupied dwellings; other restrictions may apply.

#### **QUANTITY TO BE REMOVED\ENCAPSULATED**

Indicate amount of asbestos material and attach appropriate fee.

#### **PROJECT STARTING AND COMPLETION DATES**

Dates must be consistent in accordance to required Advance Notification Period in Section 570.32. Unless you are notified otherwise, begin your project on the scheduled starting date. NWCAA will send you a copy of your Notice of Intent stamped "received". Retain a copy of your Notice of Intent for the disposal site.

#### **WORKSHIFT DAYS AND HOURS**

Indicate days and hours on site.

#### **JOB SITE ADDRESS**

Must be complete and include building numbers, school names, or any other identifying information. For complete demolition of structure, give the anticipated date that the actual demolition will begin.

#### **TYPE OF MATERIAL TO BE REMOVED AND CONTROL MEASURES**

Indicated by checking the appropriate box(es)

#### **ASBESTOS CONTRACTOR** (list the following)

1. Name and address of contractor.
2. Site Contact, and Asbestos Certification number.
3. Name of owner or chief executive officer and telephone number

#### **PROPERTY OWNER** (list the following)

1. Name and address of property owner.
2. Site contact or property owner, Title, and telephone number

#### **DISPOSAL SITE NAME AND LOCATION**

Specify the asbestos disposal site.

**INDICATE COST OF ASBESTOS PROJECT** (do not include non-asbestos related costs).

**SIGNATURE AND TITLE OF RESPONSIBLE PERSON AND WHO PARTY IS REPRESENTING.**



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For revisions to this information use  
Amendment...to Perform an Asbestos  
Project, (NWCAA Form No. 570.5)

CASE #:

NARS #:

FOR AGENCY USE ONLY

## Notice of Intent to Perform an Asbestos Project

Type of Project	Project Category (Check only one.)	Advance Notification Period	NWAPA Fee (\$)
A. <input type="checkbox"/> Emergency	1. <input type="checkbox"/> Residential (any amount/owner-occupied)	Prior Notification	25.00
B. <input type="checkbox"/> Demolition	2. <input type="checkbox"/> 10-259 linear feet 48-159 square feet	3 Working Days	150.00
C. <input type="checkbox"/> Renovation	3. <input type="checkbox"/> 260-1,000 linear feet 160-5,000 square feet	10 Working Days	300.00
D. <input type="checkbox"/> Maintenance	4. <input type="checkbox"/> More than 1,000 linear feet More than 5,000 square feet	10 Working Days	500.00
E. <input type="checkbox"/> Encapsulation	5. <input type="checkbox"/> Emergency	Prior Notification	
F. <input type="checkbox"/> Enclosure	6. <input type="checkbox"/> Amendment	Prior Notification	
G. <input type="checkbox"/> Other (specify): _____			

Quantity to be removed/encapsulated: \_\_\_\_\_ square ft. \_\_\_\_\_ linear ft.

Workshift Days:

M T W Th F Sa Su

Project starting date: \_\_\_\_\_ Completion date: \_\_\_\_\_

Workshift Hours: \_\_\_\_\_

Site address: \_\_\_\_\_  
Street City Zip code County

Location of asbestos: \_\_\_\_\_

Project description: K-12 School? ☐ Yes ☐ No School name: \_\_\_\_\_ Federal facility or marine vessel? ☐ Yes ☐ No  
Complete demolition of structure? ☐ Yes ☐ No Asbestos Survey Conducted? ☐ Yes ☐ No

Facility type: \_\_\_\_\_ Age: \_\_\_\_\_ Size: \_\_\_\_\_ # Floors: \_\_\_\_\_

Type of material to be removed/encapsulated:

☐ Fireproofing ☐ P.C. ceiling ☐ CAB ☐ Sheet vinyl ☐ Boiler insulation ☐ Duct tape  
☐ Duct paper ☐ Mag. pipe insulation ☐ Aircell ☐ CA pipe ☐ VAT ☐ Other (specify) \_\_\_\_\_

Is removal: ☐ Indoors ☐ Outdoors

Control measures & Personal Protection Equipment:

☐ N.P. enclosure ☐ Glove bag ☐ Mini enclosure ☐ Wrap & cut ☐ Water ☐ HEPA Vac ☐ Type C cont. flow  
☐ 1/2 mask APR ☐ Full face APR ☐ PAPR ☐ Type C P. demand ☐ Other (specify) \_\_\_\_\_

Asbestos contractor: \_\_\_\_\_ Contractor #: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
Street City Zip County

Supervisor: \_\_\_\_\_ Certificate #: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner/CEO: \_\_\_\_\_ Title: \_\_\_\_\_ FAX: \_\_\_\_\_

Property owner: \_\_\_\_\_ Contractor Job #: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
Street City Zip County

Site contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Asbestos disposal site: \_\_\_\_\_

Estimated cost of asbestos abatement project: \_\_\_\_\_

I DO HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION  
IS, TO THE BEST OF MY KNOWLEDGE, ACCURATE AND COMPLETE.

Signature

Date

Title

Representing