



**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
ASBESTOS ABATEMENT NOTIFICATION FORM**

State Use Only

Post Mark 11/27/19  
 Check No 5824  
 Check Amt \$ 100.00  
 Trans 20-329  
 Rec # \_\_\_\_\_

**1. TYPE OF NOTIFICATION**

- A. New     B. Blanket     C. Cancellation     D. Revised     E. Emergency     F. Postponed  
 Revision # \_\_\_\_\_ ITEMS REVISED \_\_\_\_\_

Explain Emergency \_\_\_\_\_

**2. ABATEMENT CONTRACTOR**

C\_Name Asbestos Management Company, LLC License # 53.000 3 7 6  
 C\_Address P.O. Box 456  
 C\_City Torrington C\_Contact Daniel Cimmino  
 C\_State CT C\_Zipcode 06790 C\_Phone (860) 482-6677

**3. FACILITY OWNER**

O\_Name Housatonic Valley H.S.  
 O\_Address 246 Warren Turnpike  
 O\_City Falls Village O\_Contact Jeff Loyd  
 O\_State CT O\_Zipcode 06031 O\_Phone 860 824 5123 x146

**4. PROJECT**

Name of Facility H. V. H. S.  
 P\_Address 246 Warren Turnpike Rm 118  
 P\_City Falls Village (Conaun) P\_Contact Jeff Loyd  
 P-State CT P\_Zipcode 06031 P\_Phone 860.824.5123 X146

**5A. ABATEMENT START DATE** Dec. 23, 2019 **5B. ABATEMENT END DATE** Dec. 24, 2019

REVISED START \_\_\_\_\_

REVISED END \_\_\_\_\_

**6. ONLY FOR PROJECTS OF 160 SQUARE FEET OR GREATER**

TOTAL COST \_\_\_\_\_

6A. 1% of TOTAL COST \_\_\_\_\_

plus \$100 6B. (Notification Fee Due) \$ 100

FOR REVISIONS, ADDITIONAL COST \_\_\_\_\_

Additional 1% Fee Owed \_\_\_\_\_

Paid to Date \_\_\_\_\_

**7. FACILITY USE**

- A. School (K-12)  D. Office  G. Religious   
 B. Public  E. College  H. Residential   
 C. Manufacturing  F. Commercial  I. Other, Specify

# of Units \_\_\_\_\_

NOV 29 2019

**8. BUILDING DATA**

Sq. Ft. 140107 SF Age 1961 Years Number Floors 2

**9. CLASSIFICATION**

Renovation  Demolition  Ordered Demo  (ATTACH ORDER)

**10. TECHNIQUE**

- A. Full Containment with Neg Pressure  C. Exterior   
 B. Alternative Work Practice (pre-approved)  D. Spot Repair

**11. METHOD**

- A. Removal  B. Encapsulation  C. Enclosure

**12. TYPE of DECONTAMINATION**

- A. Contiguous  B. Remote  C. Both

HAS CONTRACTOR PROVIDED US EPA with A TEN WORKING DAY or EMERGENCY NOTIFICATION? YES  NO

ADDRESS \_\_\_\_\_

CITY/TOWN \_\_\_\_\_

**13. TYPE AND AMOUNT OF ASBESTOS CONTAINING MATERIAL TO BE ABATED**

**FRIABLE MATERIAL (report in square footage)**

- A. Sprayed/Troweled on \_\_\_\_\_
- B. Boiler Insulation \_\_\_\_\_
- C. Tank Insulation \_\_\_\_\_
- D. Breaching Insulation \_\_\_\_\_
- Other Friable SqFt. \_\_\_\_\_  
(SPECIFY) \_\_\_\_\_
- E. Duct Insul \_\_\_\_\_
- F. Ceiling Tiles \_\_\_\_\_
- G. Other (Specify) Other Asbestos ceiling plaster 50 SF  
Friable, Specify Other \_\_\_\_\_  
Friable, Specify \_\_\_\_\_

**PIPE INSULATION:** Measure outside diameter (OD) of pipe, multiply the length of pipe (linear feet) times the CF to report total pipe insulation in square feet (add all SF quantities below)

OD	QTY LF	x	CF	=	SQ FT	OD	QTY LF	x	CF	=	SQ FT
					0						0
					0						0
					0						0

Conversion Factor

**NONFRIABLE CATEGORY 1**  
SQ FT SPECIFY TYPE

Total Columns 0  
**NONFRIABLE CATEGORY 2**  
SQ FT SPECIFY TYPE

H. Pipe Insulation SF  
SPECIFY TYPE

- I. Floor Coverings/Tiles \_\_\_\_\_
- J. Roofing, Specify \_\_\_\_\_
- K. Packings, Gaskets \_\_\_\_\_
- Other NF \_\_\_\_\_
- L. Transite board \_\_\_\_\_
- M. Other NF, Specify \_\_\_\_\_
- N. Other NF, Specify \_\_\_\_\_
- Other NF, Specify \_\_\_\_\_

List other NF (M) \_\_\_\_\_

**14. HAULER \*list up to 3 sites**

H1Name	<u>Transwaste</u>	H2Name	_____
H1Address	<u>3 Barker Drive</u>	H2Address	_____
H1City	<u>Wallingford</u>	H2City	_____
H1State,Zip	<u>CT, 06492</u>	H2State,Zip	_____
H1Contact	_____	H2Contact	_____
H3Name	_____		
H3Address	_____		
H3City	_____		
H3State,Zip	_____		
H3Contact	_____		

**15. WASTE DISPOSAL SITE \*list up to 3 sites**

L1Name	<u>BFI Imperial Landfill</u>	L2Name	_____
L1Address	<u>11 Boggs Road</u>	L2Address	_____
L1City	<u>Imperial</u>	L2City	_____
L1State,Zip	<u>PA, 15126</u>	L2State,Zip	_____
L1Contact	_____	L2Contact	_____
L3Name	_____		
L3Address	_____		
L3City	_____		
L3State,Zip	_____		
L3Contact	_____		

Form Prepared by (printed)

Barney Cimmino

Signature

Barney Cimmino