

## STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

## DEMOLITION NOTIFICATION FORM

Postmark Date	10/2/19
Check#	19399
Transmittal No.	20-211
Amount Paid	\$ 50.00
Record No.	

This form is to be completed and postmarked or hand delivered to the Connecticut Department of Public Health at least ten (10) days prior to the start of demolition as required by the Regulations of Connecticut State Agencies (RCSA), Section 19a-332a-3. Each demolition notification <u>must be accompanied by a fee of FIFTY (\$50) dollars.</u> A check in that amount made payable to "Treasurer, State of Connecticut" must be submitted with the notification form. In case of emergency notifications, this form is to be completed and postmarked or hand delivered within one (1) working day following the start of demolition. A copy of the written order requiring demolition prepared by a state or local building official shall accompany each emergency demolition notification. Faxed originals are not acceptable. Revisions to the original notification form may be faxed. Further instructions are found on back of this form.

<i>1</i> .		TYPE	OF NOTIFICATION:							
A. X NEW	B. EMERGENCY	C. REVISED	ITEMS REVISED:							
2.		$F_{\lambda}$	ACILITY OWNER:							
NAME:	Jeff McCue									
ADDRESS:	44 Kelly Road									
CITY:	Middlebury		STATE:	CT						
ZIP:			PHONE NO.:							
3.	L.	OCATION OF I	FACILITY TO BE DEN	MOLISHED:						
NAME:	Vacant House									
ADDRESS:	44 Kelly Road			N2						
CITY:	Middlebury		STATE:	CT						
ZIP:			PHONE NO.:							
HAS AN ASBESTOS INSPECTION BEEN CONDUCTED? YESX NO										
4. INS	PECTION INFORMA	ATION: NAME O	OF INSPECTOR: AMC	Environmental						
LICENSE #:		DATE O	of inspection: Au	gust 18, 2019						
INSPECTOR ADDRESS:	PO Box 423		CITY:	Stratford						
STATE:	CT ZIP:	06615	PHONE NO.:	203-378-5020						

(Inspection information applicable to facilities subject to the asbestos NESHAP, 40 C.F.R., Part 61)

In accordance with Section 61.145 of the U.S. Environmental Protection Agency's National Emission Standards for Hazardous Air Pollutants (NESHAPs) regulation, the owner or operator of a facility shall, prior to the commencement of renovation or demolition, inspect the affected portions of the facility for asbestos, including Category I and Category II nonfriable asbestos.



Phone: (860) 509-7367/ Fax (860) 509-7378
Telephone Device for the Deaf: (860) 509-7191

410 Capitol Avenue, MS# **51 AIR**P.O. Box 340308

Hartford, CT 06134-0308 Affirmative Action / An Equal Opportunity Employer OCT = 7 2019

5(A.)	DEMOLITION START DATE:	10/14/2019		EMOLI OMPLE		I N DATI	7.	10/25/2019
6.	BIANI DAIL.		USE OF FAC	a marin da santigua a 22 de ser el como de com				
A. SCHO	OOL (K-12) B. PUE	BLIC BUILDING	C. MANUI	ACTURI	NG	<b>D.</b> O	FFICE	E. COLLEGE
F. COM	MERCIAL G. CHU	JRCH/SYNAGOGUE	H. RESIDE	NTIAL,#	OF DW	ELLING:	3	X I. OTHER
(I. S	PECIFY)							
7.	BUILDING DATA:	SQUARE FEET: 1	300 # OF FLO	OORS:	2		AGE:	1930
8.		DEM	OLITION CO	NTRA	CTOR			
NAME:	Cherry Hill Cons		CONTACT	2011.00 Zero (100 Version)	A CONTRACTOR (C. C.)	Mark	Graha	m
ADDRE								
CITY:	North Branford			STA	YTE:	CT	****	
ZIP:	06471		PHONE NO	).: 20	3-488	3-7929		
9.		DEMOL	ITION DISPO	SAL F	ACIL	ITY:		
NAME:	Ciro Transfer Fa		i dingentari karangan dan ka					
ADDRE	ss: 51 Ciro Road							
CITY:	North Branford			STA	ATE:	СТ		
ZIP:	06471		PHONE NO	.: 20	3-488	3-7929		
10.		DEMO	OLITION WA	STE H	AULE	R:		
NAME:	Cherry Hill Cons			1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m				
ADDRE	ss: 51 Ciro Road							
CITY:	North Branford			ST	ATE:	CT		
ZIP:	06471		PHONE N	D.: 20	03-48	8-7929	)	
11.		PERSON	COMPLETA	NG TH	us F	ORM:		
NAME:	Mark Graham	e Virginia de la participa de la propieta de la pr	er ja var summen en sente halle kristle i Ville Re	Tarket of the Control of Association (Control		C. C 17.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74 - 14.74		and a second
ADDRE	SS: 51 Ciro Road							
CITY:	North Branford			STA	ATE:	CT		
ZIP:	06471		PHONE 1	Ю.:	203-	488-79	29	
SIGN	ATURE MARK GR	AHAM			DA	TE:	10/2/	/2019

The submission of the **Notification of Demolition Form** is not required provided that an **Asbestos Abatement Notification Form** was previously submitted to the Department of Public Health involving abatement related to the demolition of the facility. In that case, the **Asbestos Abatement Notification Form** submitted to the agency satisfied the notification requirement for demolition of the facility. In all cases of demolition, one and only one form (**Notification of Demolition Form** or **Asbestos Abatement Notification Form**, as applicable) shall be sufficient to satisfy the Department of Public Health notification requirements detailed in Section 19a-332a-3 of the RCSA.