



Maine Department of Environmental Protection

Asbestos/Lead Unit
17 State House Station
Augusta, Me 04333-0017
Tel (207) 287-2651 FAX (207) 287-7826



Building Demolition Form (BDF)

A) Pre-Demolition Building Inspection and Abatement Information

Important Notice: This Notification is Required by Law

Maine Law requires that buildings be inspected for asbestos and that asbestos-containing materials be removed from any building prior to demolition. Demolition means the tearing down or intentional burning of a building or part of a building. This includes any institutional, commercial, public, industrial, or *residential* building. Inspection and/or removal of more than 3 square feet or 3 linear feet of asbestos-containing materials must be performed by an asbestos firm licensed by the ME DEP.

Municipalities are requested to have applicants for demolition permits complete this form prior to the issuance of a demolition permit. The Department also requests that a demolition permit **Not** be issued to an applicant for a "no" answer to any of the questions below. Please call (207) 287-2651 with any questions.

Please answer all questions:

1. *yes* *no* Has the building been inspected by a DEP licensed asbestos consultant?
2. *yes* *no* If asbestos was found, has a 10 day notification sent to DEP?
3. *yes* *no* *n/a* Has the asbestos (if any) been removed by a DEP licensed asbestos contractor?

Note: This form constitutes notification to the Department when asbestos is not present in the building being demolished.

B) General Information

<i>property address:</i>	<i>asbestos survey performed by: (name & address)</i>
<i>telephone:</i>	<i>telephone:</i>
<i>property owner: (name & address)</i>	<i>asbestos abatement contractor: (name & address)</i>
<i>telephone:</i>	<i>telephone:</i>
<i>demolition contractor: (name & address)</i>	<i>demolition start date:</i>
	<i>demolition end date:</i>
	<i>building type: (commercial, residential, etc.)</i>
<i>telephone:</i>	

Once filled out, please fax or mail immediately to DEP

Original to DEP

Copy to Municipality

Copy to Owner or Operator