

## NOTIFICATION OF BRIDGE DEMOLITION

1. TYPE OF NOTIFICATION: <input type="checkbox"/> Original <input type="checkbox"/> Revised <input type="checkbox"/> Cancelled		
2. FACILITY INFORMATION: <i>(Identify owner, removal contractor, and other operator)</i>		
OWNER:		
Address:		
City:	State:	Zip:
Contact Person (Engineer):		Telephone:
PRIME CONTRACTOR FOR DEMOLITION WORK:		
Address:		
City:	State:	Zip:
Contact Person:		Telephone:
REMOVAL CONTRACTOR (if different from Prime Contractor):		
Address:		
City:	State:	Zip:
Contact Person:		Telephone:
3. TYPE OF OPERATION: <u>Demolition and Removal of Existing Bridge</u>		
4. IS ASBESTOS PRESENT?: <input type="checkbox"/> Yes <input type="checkbox"/> No		
5. FACILITY DESCRIPTION: FHWA Structure No.:		Present/Prior Use:
Route:	City:	County:
Directions to Bridge:		
Bridge Size: _____ sq. ft.	# of Decks:	Age:
6. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETERMINE THE PRESENCE OF ASBESTOS MATERIAL: <input type="checkbox"/> PLM <input type="checkbox"/> Inspected by licensed asbestos inspector		
7. SCHEDULED DEMOLITION DATES      Start:		Complete:
8. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NON-FRIABLE ASBESTOS MATERIAL BECOMES CRUMBLLED, PULVERIZED, OR REDUCED TO POWDER:  <u>Stop work. Call certified asbestos contractor.</u>		
9. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE.		
_____		_____
<i>(Signature of Prime Contractor Representative)</i>		<i>(Date)</i>

ATTENTION: _____	
This form is specific to Contract Line No. _____ for _____ County Project No. _____	
<ul style="list-style-type: none"> <li><input type="radio"/> Complete items 1, 2, 4, 5, 7, and 9.</li> <li><input type="radio"/> Mail a copy to the Engineer shown in Item 2.</li> <li><input type="radio"/> Mail a copy to the Department of Natural Resources at the following address:</li> </ul>	
Air Quality Bureau Attn.: Asbestos NESHAP Coordinator Iowa Department of Natural Resources 7900 Hickman Road, Suite 1 Windsor Heights, IA 50324	
Contract No.: _____ / _____	