

## **REPORTING PROCEDURES FOR ASBESTOS BLANKET NOTIFICATIONS**

- STEP 1:** Applicants must complete the form BWP AQ 05 ASBESTOS BLANKET NOTIFICATION APPLICATION and the ANF 001 notification form with the \$85.00 decal, and send both forms to the usual post office box in Boston.
- STEP 2:** After the approval has been granted, submit an ANF 001 with the \$35.00 Blanket Decal for each job completed under the blanket. For Incidental Maintenance projects the ANF 001 must be submitted within 24 hours of the asbestos removal operation. For large - scale abatement operations the notification must be submitted at least three (3) working days (72 hours) PRIOR to commencement of the abatement activities.
- STEP 3:** Send a fax copy to the appropriate MassDEP Regional Office within the specified time frames stipulated in STEP 2.

If you have any questions or problems in notifying, please contact your Regional MassDEP Office.

Find your region: <http://mass.gov/dep/about/region/findyour.htm>



Massachusetts Department of Environmental Protection  
Bureau of Waste Prevention

# Asbestos Blanket Notifications

## 1. Brief Project Description

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



- Incidental Maintenance Activity     Large Scale Asbestos Abatement Project (LSAAP)

(LSAAP's are issued on a building-by-building basis during periods of planned renovations only.)

## 2. Facility Information

\_\_\_\_\_  
Facility name

\_\_\_\_\_  
Facility Address

\_\_\_\_\_  
Facility Contact

\_\_\_\_\_  
Title

\_\_\_\_\_  
Facility Phone

\_\_\_\_\_  
Facility Owners

\_\_\_\_\_  
Facility address (town/city)

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Present Use of Facility/Building

\_\_\_\_\_  
Past Use of Facility/Building

\_\_\_\_\_  
Age of Facility/Building

\_\_\_\_\_  
Size of Facility/Building

\_\_\_\_\_  
Number of structures

Description of Surrounding Area

Residential

Commercial

Rural

Industrial

Institutional

### Storage Location

\_\_\_\_\_  
Building

\_\_\_\_\_  
Room No.

\_\_\_\_\_  
Contact

\_\_\_\_\_  
Title

## 3. Reason For Request of Blanket

To avoid lengthy delays in processing/evaluation/approval of request for blanket notification, include specifics as necessary i.e.: nature of facility, size of facility, unique nature of project, etc. Submit attachments as necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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# Asbestos Blanket Notifications

4. Description of Asbestos Abatement IMA/LSAAP For Which This Application is Submitted:

Include amounts and types of asbestos containing material involved specifications, floor plans, activity schedules etc. which may further help to describe abatement operations. Submit attachments as necessary.

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5. Project Schedule: (Blankets are issued for the calendar year only January 1 through December 31 and cannot be extended.)

Estimated start Date

Estimated End Date

Please Note: Each individual blanket notification may be used for projects undertaken within the approved time period only. Projects exceeding the approved time period or extending into the following calendar year require separate blanket application.

6. Contractor Information

Name

Phone

Extension

Street Address

City Town

Dept of Occupational Safety License No.

Please Note: If more than one contractor is involved; please list all contractors and respective scope(s) of work on attachment.

7. On-site Storage

Specific Location of Secured Storage Area

Individual Responsible for Security

Title

Form Completed by:

Signature

Printed Name

Date

Title

Phone

Please Note: This form must be submitted with a fully completed, Department of Environmental Protection, Asbestos removal notification (ANF-001) form indicating the total scope of the project. Completed applications must be sent to the appropriate regional office for timely consideration.