

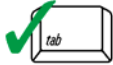


Massachusetts Department of Environmental Protection
Bureau of Waste Prevention
On-Site Rubble Crushing Notification Form
 Submitted in Compliance with 310 CMR 16.05(3)(e)6

INSTRUCTIONS: This form can be used to satisfy the notification requirements for on-site ABC rubble crushing. Complete and mail this form at least 30 days prior to crushing ABC rubble. Send one copy each to the appropriate MassDEP regional office and to the board of health in the municipality where crushing will take place.

A. Notifier Information

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



 Company or Individual Name

 Street Address

 City/Town

 State

 Zip Code

 Contact Person

 Contact Telephone

 Contact Email Address

Mailing Address (if different from above)

 Street Address/P.O. Box

 City/Town

 State

 Zip Code

B. Project Information

Location Where Rubble Will be Generated & Crushed (if different from above)

 Street Address

 City/Town

 City/Town

Brief Description of Project

Was an asbestos survey conducted? Yes No

Was an asbestos abatement action taken and completed? Yes No

As required by 310 CMR 16.05(3)(e)6, I am providing 30 days prior notice that asphalt, brick or concrete rubble will be crushed in accordance with the requirements of 310 CMR 16.05(3)(e).

Crushing will commence at the location above on: _____
 Approximate Date (MM/DD/YYYY)

Crushing will continue for approximately this length of time: _____
 Approximate Number of Days



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C. Notification & Certification

I am providing a copy of this form to the following
MassDEP Regional Office:

- Central (Worcester)
- Northeast (Wilmington)
- Southeast (Lakeville)
- Western (Springfield)

I am providing a copy of this form to the Board of Health in
the following municipality (where crushing will take place):

Name of City or Town

I believe the rubble to be crushed is asbestos free; not
painted, coated or impregnated with any substance; and
otherwise in compliance with 310 CMR 16.05(3)(e).

Signature

Name

Title

Date (MM/DD/YYYY)