1. **Brief Project Description**

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

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

2. **Facility Information**

   - Facility Name
   - Facility Address
   - Facility Contact
   - Title
   - Facility Phone
   - Facility Town or City
   - Facility Owner(s)
   - Facility 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 Name
   - 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.

4. **Description of Asbestos Abatement IMA/LSAAP This Application Covers**

   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.
5. Project Schedule

Estimated Start Date (MM/DD/YYYY)  Estimated End Date (MM/DD/YYYY)

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

6. Asbestos Contractor Information

Name
Phone
Extension
Street Address
City Town
Dept of Labor Standards No.

7. On-Site Storage

Specific Location of Secured Storage Area
Individual Responsible for Security
Title

8. Certification

“I certify that I have personally examined the foregoing and am familiar with the information contained in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment. I am aware that this permit application or notification shall not be deemed valid unless payment of the applicable fee is made.”

Signature
Printed Name
Title
Date (MM/DD/YYYY)

9. Submission of Application

Note: MassDEP review will begin only after your submissions have been received at both locations.

<table>
<thead>
<tr>
<th>STEP 1: Submit Application</th>
<th>STEP 2: Submit Fee Payment</th>
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<tbody>
<tr>
<td>Send the following materials to the appropriate MassDEP Regional Office*, Attention: Asbestos Section:</td>
<td>Send the materials below to:</td>
</tr>
<tr>
<td></td>
<td>MassDEP</td>
</tr>
<tr>
<td></td>
<td>P.O. Box 4062</td>
</tr>
<tr>
<td></td>
<td>Boston, MA 02211</td>
</tr>
<tr>
<td></td>
<td>— This original completed and signed form.</td>
</tr>
<tr>
<td></td>
<td>— A copy of the check/money-order from Step 1.</td>
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<td>— Any attachments that fully answer questions on this form.</td>
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<td>— All supporting documentation.</td>
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<td>— A copy of this completed and signed form.</td>
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<td>— Fee payment of $200 (check or money order payable to “Commonwealth of Massachusetts”).</td>
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<td>Please Note: Decals may no longer be used to pay Blanket Notification fees.</td>
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</tbody>
</table>

*Find the MassDEP Regional Office for the community where this work will be done: [https://www.mass.gov/service-details/massdep-regional-offices-by-community](https://www.mass.gov/service-details/massdep-regional-offices-by-community)