DEPARTMENT OF HEALTH SERVICES

Division of Public Health F-00041 (05/2024)

STATE OF WISCONSIN

Bureau of Environmental & Occupational Health Wis. Admin. Code ch. DHS 159

ASBESTOS PROJECT NOTIFICATION

Use this form to notify the Department of Health Services (DHS) of asbestos abatement activities as required under Wis. Admin. Code ch. DHS 159. Do not use this form to notify the Department of Natural Resources (DNR). See page 2 for instructions. Notify online at https://health.wisconsin.gov/Waldo/Notify.

Company Project Number:					
PROPERTY INFORMATION					
Property type (check most accurate response)					
☐ Government ☐ University ☐	Residential/No. Units	(Owner-occupied	☐ Rental)	Other:	
Facility/building name, if applicable					
Property contact person Phone number					
Name of owner	Name of owner Phone number				
Street or fire code address	Street or fire code address City ZIP code			ZIP code	
Location of project on premises					
ASBESTOS PROJECT TYPE Check	all that apply				
	ncapsulation	Other (describe):			
Structure will be: Occupied	Vacant (If occupied, con	nplete and post Form F	-44016, Asbesto	os Occupant Protection Plan)	
NOTICE TYPE	I				
☐ Original ☐ Cancellation	☐ Original ☐ Cancellation ☐ Revision, No. Revising: ☐ Schedule ☐ Type/amount of ACM ☐ Other:				
☐ Planned renovation project Start date(mm/dd/yy): End date: ☐ Sub-project No:			☐ Sub-project No:		
PROJECT SCHEDULE Start date ind	cludes project set-up				
Abatement dates (mm/dd/yy) Star	Abatement dates (mm/dd/yy) Start date: End date: Work hrs:			☐ a.m. ☐ p.m.	
Work days (Check all that apply) to □ a.m. □ p.m. □ Mon. □ Tues. □ Wed. □ Thurs. □ Fri. □ Sat. □ Sun.			☐ a.m. ☐ p.m.		
PRE-PROJECT ASBESTOS INSPEC	CTION		l .		
			certification number		
to					
ABATEMENT CONTRACTOR INFORMATION Company name DHS certification number & expiration date					
Address Contact person name Office phone number			umber		
City	State ZIP Code Cell phone number		Cell phone number		
TYPE AND AMOUNT OF ASBESTO	S (See page 2 for guidance	e) Location: Interior	☐ Exterior	Total Amount of Asbestos	
Friable - Submit notification for:	☐ < 260 linear feet ☐ <	160 square feet ☐ <	35 cubic feet		
	Any amount of asbestos 5 units	s in residential building	s with fewer than	Linear feet	
Type: Pipes/ducts Surfacing Other friable ACM:				Square foot	
 Non-Friable - Submit notification for asbestos projects involving: ☐ Flooring: ☐ Any amount, intact manual methods, or, ☐ < 160 square feet, mechanical chipping 					
☐ Roofing: ☐ Any amount, intact manual methods, or, ☐ <5,580 square feet, power-sawing					
☐ Siding: Any amount, intact methods only ☐ Other non-friable ACM: ☐ Cubic feet			Cubic feet		
				Capio icci	

FEES See Page 5 for acceptable payment methods a	Fee Enclosed	
☐ Original notice, 2 or more working days	☐ Sub-project ☐ Revision, less than 2 working days	□ \$50
☐ Original notice, less than 2 working days	☐ Planned renovation project notice	□ \$100
	ized representative of the abatement company named above e best of my knowledge and that this project complies with V	
SIGNATURE – Authorized Representative	DHS Certification Number	Date Signed

NOTIFICATION GUIDANCE - Follow these instructions to determine if asbestos project notification to DHS is required:

- 1. Choose the table below that matches the property type.
- 2. In that table, choose the row that describes the type of activity and amount of ACM involved in the activity.
- 3. In that row, choose the column that describes the type of material (friable or non-friable).
- 4. The cell at the intersection of the chosen row and column indicates whether notice to DHS is required.

Table 1: Residential buildings with 1 to 4 dwelling units		
Abatement Activity	Friable Asbestos	Non-friable Asbestos
Removal of <i>more than</i> 1 bag* of ACM and up to any amount of removal	Notify DHS	Notify DHS
Enclosure, encapsulation or repair of <i>more than</i> 3 square ft. or <i>more than</i> 3 linear ft. of ACM	Notify DHS	No DHS notice required

Abatement Activity	Friable Asbestos	Non-friable Asbestos
Removal of <i>more than</i> 1 bag* of ACM but <i>less than</i> 160 square ft., <i>less than</i> 260 linear ft., or <i>less than</i> 35 cubic ft.	Notify DHS	Notify DHS
Removal of 160 square ft. or more, 260 linear ft. or more, or 35 cubic ft. or more of ACM	No DHS notice required**	Notify DHS
Enclosure, encapsulation or repair of <i>more than</i> 3 square ft. or <i>more than</i> 3 linear ft. of ACM	Notify DHS	No DHS notice required

^{* &}quot;Bag" means a disposal bag or glove bag no larger than 60" x 60", properly filled and sealed.

SUBMITTING NOTIFICATION

Notification delivery methods allowed based on timing of submittal and type of notice

Original - 2 or more working days*	Original - less than 2 working days*	Revision	Planned Renovation Project	Sub-project - 2 or more working days*	Sub-project - less than 2 working days*
- Online notice	- Online notice	- Online notice	- Postal service**	- Fax	- Delivery service
- Postal service**	- Delivery service	- Email	- Delivery service	- Email	
- Delivery service		- Fax		- Postal service **	

^{* &}quot;Working day" means any day except Saturday or Sunday. For notification purposes a working day ends at 4 p.m.

^{**} Notice to DNR may be required. Notice is required to DNR for removal of any amount of friable or non-friable ACM on DNR-regulated demolition projects and for friable asbestos or RACM in amounts more than 160 square feet, 260 linear feet, or 35 cubic feet in residential buildings with 5 or more dwelling units and in all other facilities. Contact DNR at 608-266-3658 for more assistance.

^{**} Must be postmarked 4 working days or more before project start date.

Cancellations - Submit project cancellation before the start date on the original or most recently revised notice online or by fax to 608-266-9711 or email to DHSAsbestosLead@wi.gov. Call (608) 261-6876 with questions.

Revisions – Whenever information for a project changes, submit a revised notice to DHS on a copy of the original notice. Be sure the original project number is clearly identified. In the 'Notice Type' section, check 'Revision' and enter the number of the revision in sequential order. Circle or otherwise highlight all revised information.

Revised notices with no additional fee may be submitted by fax to 608-266-9711 or email to DHSAsbestosLead@wi.gov. Any revised notices with a fee required shall be submitted with the revision by mail or using the online notice form.

Mailing Address

Postal service delivery must be postmarked 4 working days or more before project or sub-project start.

Address to: State of Wisconsin Box 93419 Milwaukee, WI 53293-3419

Delivery Service Address

US Bank 777 E. Wisconsin Avenue Attn: Lockbox 93419-WI DHS Lead MK-WI-TCRL Milwaukee, WI 53202

Payment must accompany the notification. See page 4 for additional information on fees.

For notifications submitted using this form, the fee is payable only by check or money order. To pay by Visa or MasterCard credit or debit card, or electronic check, notify online at https://health.wisconsin.gov/Waldo/Notify.

INSTRUCTIONS FOR COMPLETING ASBESTOS PROJECT NOTIFICATIONS

Each section on the notification form must be completed. The form must be signed and dated by an authorized representative of the asbestos company conducting the project.

Company Project Number - Assign a unique project number. This number must be included on any revised or cancelled notice.

Property Information - Provide information needed to locate the actual asbestos project worksite on the property. Enter in the 'Property Contact Person' box the owner, owner representative, or property manager to be contacted regarding the project.

Property Type - Check the box that best describes the use of the portion of the property where the ashestos activity will be 100

	iducted.
	☐ Commercial/Industrial/Business. Property used for money-making purposes such as retail, business offices, healthcare facilities, wholesale and warehousing, manufacturing, and production.
	☐ Public. Property not otherwise described that is routinely used by the public, such as a church, library, private college, YMCA or other club, community center, or community arts theater or facility.
	☐ K-12 School. Public or private academic school for children in grades kindergarten through 12.
	☐ Government/University. Building owned, managed, or leased by a local, state, or federal governing body or organization, or by a 2-year or 4-year public college or university.
	☐ Residential. Single-family or multi-family dwelling, apartment, condominium, loft, dormitory, or other facility where any person resides. Include the total number of dwelling units in the structure, and whether the property is owner-occupied or rental.
	☐ Other. Any other type of building or structure, including facilities such as water towers, bridges, tunnels, parking structures.
Asl	bestos Project Type – Check all boxes that apply.
	☐ Removal. Activity that takes out any or all ACM or suspect ACM in or on a structure or takes out any or all structural components that contain or are covered with ACM or suspect ACM.
	☐ Enclosure. Activity that creates an airtight, impermeable, permanent barrier over or around ACM.
	☐ Encapsulation. Activity that treats ACM with a product specifically designed to surround or embed asbestos fibers in an adhesive matrix.
	Repair. Activity that returns damaged ACM to an undamaged condition or to an intact state.
	Other. Activity not covered by standard abatement activities, such as chemical or mechanical conversion. Occupancy:
	☐ 'Occupied' if any part of the attached structure will be occupied by persons or furnishings. ☐ 'Vacant' if the structure will be empty of both occupants and furnishings for the duration.
	Note: If occupied, Form F-44016, Occupant Protection Plan, must be completed and posted in plain view outside each regulated area.

Notice Type — Check appropriate box.
☐ Original . Provides first written notice for a project.
☐ Cancellation. Cancels a project already notified. If a project is re-scheduled after being cancelled, a new notice with fee is required.
☐ Revision. Changes information on a previously submitted project notice. Enter the number of the revision in the space provided (the first revision is Revision No. 1).
Check box or boxes to indicate the information being revised. Circle all changed information on the notice form. For a later start date, submit before the start date on the original notice. For an earlier start date, submit at least 2 working days before the revised start date. Revised notice submitted less than 2 working days before the new start date shall include a \$50 fee. For an earlier end date, submit as soon as known. For a later end date, submit before the project end date on the current active notice. A notice may not be revised after the project end date. A new original notice with fee must be submitted.
Planned Renovation Project. Provides notice for a planned renovation project expected to include a series of asbestos abatement
activities conducted within a given time period not to exceed one year. Notice shall be submitted at least 2 working days before the start of the planned renovation project. Provide the renovation project start and end dates, not to exceed one year.
Sub-project number. Sub-projects under planned renovation project notices must be separately notify to DHS and must include the company project number for the planned renovation project notice. For each sub-project notice assigns a sub-project number that sequentially numbers the sub-projects for the planned renovation project (with the first sub-project numbered 1). Submit separate notice for each new sub-project.
Note: Keep a copy of any notice you submit. Use the copy for any future revisions. Make sure copies are clear and legible.
Project Schedule — Project dates include the date set up begins, and ends after the regulated areas are removed or dismantled.
Abatement dates. Enter the start date and the end date for the project or sub-project, including set up dates.
Work days. Check the boxes for the days of the week workers will be on the job.
Work hours. Enter the standard daily work hours for the project – daily start and stop times.
Note: You must submit a revised notice whenever a start or end date or standard work schedule changes. Accurate information is necessary to allow DHS to conduct onsite inspections as work will being conducted. If no one is present on site when a DHS representative arrives, the contractor may be found in non-compliance with Wis. Adm. Code ch. DHS 159.
Pre-Project Asbestos Inspection — If the structure was inspected prior to the asbestos abatement project (required in schools), complete the information requested, including the date the inspection was completed, the inspector's name and DHS certification number.
Abatement Contractor Information — Enter all information requested in this section. The contact person should be an authorized representative of the company who is knowledgeable about the project. This person should be readily available to DHS by telephone throughout the project.
Note: The company certification number and expiration date are located on the company certificate mailed to the asbestos company after certification is granted. This number must be provided with all notices submitted to DHS.
Type and Amount of Asbestos — Check location of abatement project, type of asbestos and amount of asbestos to be abated. Refer to page 2 for guidance on determining when notice to DHS is required and to determine if notice to DNR is required. This Asbestos Project Notification form may be used only for notifications to DHS. Check with DNR at 608-266-3658 for DNR notification requirements.
Interior/Exterior. Check one or both boxes to indicate the project location or locations.
Friable/Non-Friable. Check one or both boxes to indicate the type(s) of ACM to be abated.
Friable. Check the box or boxes that describe the amount of ACM or that project is at a residential structure with fewer than 5 units Check the box or boxes for the types of material - pipes/ducts, surfacing, or other friable ACM. If 'other' is checked, describe the material.
Non-Friable.

Check the box or boxes for the types of materials - flooring, roofing, siding, or other non-friable ACM If 'flooring' or 'roofing' is checked, also check whether manual or mechanical methods will be used. If 'other' is checked, describe the material.

Amount of Asbestos. Enter the total amount of ACM to be abated in linear, square or cubic feet. Use cubic feet only if unable to describe amount in linear or square feet.

Fees — Determine the notification fee, if any, and check the appropriate box. Note: A 'working day' means any day except Saturday, Sunday, or a state or federal holiday. Notices submitted after 4:00 p.m. are considered submitted the next working day.

Original notice:

\$50 for an original notice submitted 2 working days or more before the project start date.

\$100 for an original notice submitted less than 2 working days before the project start date.

Revised notice:

\$50 when a revision to an earlier start date is submitted less than 2 working days before the new start date.

No fee is required for any other revision.

Planned Renovation Project and Sub-Project notices:

\$100 for a planned renovation project notice.

\$50 for a sub-project notice submitted less than 2 working days before the start date of the sub-project.

No fee is required for a sub-project notice submitted 2 working days or more before the start date.

Completing the fee section.

If no fee applies, check the 'No fee required' box.

If a fee applies, check the box that best describes the notification: original, sub-project, revision or planned renovation.

Check the appropriate fee amount in the **Fee Enclosed** column.

Enclose a check or money order in full payment of the applicable fee.

Project Notification Affidavit – an authorized company representative who can confirm the accuracy of the information provided must sign the notification form.