Building Official Career Development
“Awareness of Public Health Asbestos Regulations”
February 2013

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State of Connecticut, Department of Public Health
Environmental Analyst 3

Introduction to the Asbestos Program

CT Department of Public Health
Environmental Health Section
Asbestos Program
DPH LICENSURE REQUIREMENTS
(http://www.dph.state.ct.us/)

Red Flag List Item

- Asbestos Contractors
- Asbestos Workers
  - Supervisor and Worker
- Asbestos Consultants
  - Inspector
  - Inspector/Management Planner
  - Project Designer
  - Project Monitor
- Environmental Laboratories
- Asbestos Training Providers

Current Status of Asbestos Industry

- Approximately 240 licensed asbestos abatement contractors.
- Approximately 3,300 certified asbestos workers and supervisors.
- Approximately 590 licensed asbestos consultants.
- Each year there is approximately 3500 notified asbestos abatement projects in Connecticut.

Health Effects of Asbestos Exposure

- [Image of human digestive system and lungs]
Asbestosis
• Chronic lung disease characterized by scarring of the lungs.
• Not a cancer.
• Long term elevated exposure required.
• 20 year latency period.
• No longer common in the U.S.

Mesothelioma
• Cancer of the pleural lining of the lungs.
• Nearly always fatal.
• Specific to asbestos exposure, but not necessarily high exposure.
• 25-30 Year Latency Period.

Lung Cancer
• Synergistic effect with smoking (50-75 times more likely to get cancer if smoking and asbestos exposure is combined).
• 20 –25 year latency period.
LUNG CANCER

Asbestos-related deaths are at an epidemic scale in the United States

Brief Regulatory Overview
Applicable Regulations
http://www.dph.state.ct.us/

- **State**: Standards for Asbestos Abatement (Section 19a-332a-1 to 19a-332a-16)
- **State**: Licensure and Training Requirements (Section 20-440-1 to 20-441-1)
- **Federal**: EPA regulations do not apply to residential units with four or fewer units. All other buildings do fall under the Clean Air Act, Subpart M, National Emission Standard for Asbestos (NESHAPS).

Friable vs. Non-Friable

- **Friable Asbestos Containing Material**: means any asbestos containing material that hand pressure can crumble, pulverize, or reduce to powder when dry.
- **Examples**: fireproofing, thermal system insulation on boilers and piping, ceiling tiles, and plasters.

DPH Regulations apply to all Asbestos Abatement Projects:

- "Asbestos Abatement Project" means any asbestos abatement performed within a facility involving more than three (3) linear feet or three (3) square feet of asbestos containing material.
DPH Regulations do not apply to exterior non-friable asbestos removal:

• As long as the materials remain non-friable, and the waste is packaged and handled as asbestos waste.
• Examples: Transite siding and roofing.

Types of Asbestos Inspections

General Audit
• Performed by a licensed Asbestos Inspector.
• Only accessible materials inspected.
• Destructive testing methods not used.
• Recommended for all facilities but not required except in schools.
Renovation Impact Survey

- Performed by a licensed Asbestos Inspector.
- All materials (accessible and inaccessible) that will be impacted by the renovation project shall be inspected.
- Destructive testing may be required.
- Residential >4 Units and All Other Buildings: Required by Federal EPA
- Residential 4 or Fewer Units: Strongly recommended to avoid unintentionally performing an “Asbestos Abatement Project”.

Pre-Demolition Survey

(Red Flag List Item)

- Performed by a licensed Asbestos Inspector.
- All materials within or attached to the facility (accessible and inaccessible) shall be inspected.
- Destructive sampling almost always required.
- Residential >4 Units and All Other Buildings: Required by Federal EPA.
- Residential 4 or Fewer Units: Strongly recommended to avoid unintentionally performing an “Asbestos Abatement Project”.

Important Inclusions to the EPA NESHAPS Inspection Requirements

- The intentional burning of any structures, including 1-4 Unit residential structures, requires a thorough EPA NESHAPS asbestos inspection.
- The demolition of a 1-4 Unit residential structure, where the property is going to be incorporated into a “facility”, requires a thorough EPA NESHAPS asbestos inspection.
Notification to State DPH

Types of Notifications
• Asbestos Abatement Project Notification
• Demolition Notification Form
• Either an Asbestos Abatement Project Notification or a Demolition Notification Form shall be filed for every building or structure being demolished in CT.

Common Uses of Asbestos

Boiler and Flue Insulation
Pipe and Pipe Fitting Insulation
Vinyl Floor Tile and Mastic

Sheet Vinyl Flooring, Backing Paper, and Mastic
Exterior: Transite Siding, Roofing Products

Spray Applied Fireproofing

Transite Paneling (Interior)
Transite Piping/Ducting (Interior)

Window Glazing Caulking Materials

Ceiling Plasters, Textured Paint, Patching Compounds
**Red Flag Items**

- In all buildings except 1-4 unit residential dwellings, an asbestos survey is required prior to the commencement of renovation and/or demolition activities.
- An Asbestos Abatement Notification Form or a Demolition Notification Form is required to be filed with the Department prior to any demolition project occurring.
- All professionals in the asbestos field are required to be licensed by the Department.
- All asbestos waste is required to be packaged and disposed as a “special” waste.

**Questions?**
This form is to be completed and postmarked or hand delivered to the Connecticut Department of Public Health at least ten (10) days prior to the start of asbestos abatement, as required by the Regulations of Connecticut State Agencies, Section 19a-332a-3. In case of an emergency, this form is to be completed and postmarked within one (1) working day following the start of asbestos abatement. Faxed originals are not acceptable. Revisions may be faxed unless an additional fee payment is due.

1. **TYPE OF NOTIFICATION:**
   - A. NEW
   - B. BLANKET
   - C. CANCELLATION / POSTPONED
   - D. REVISED (ITEMS REVISED)
   - E. EMERGENCY
     
     **DESCRIBE NATURE OF EMERGENCY**

2. **ABATEMENT CONTRACTOR:**
   - NAME:
   - LICENSE #:
   - ADDRESS:
   - CITY: STATE: ZIP:
   - PHONE #:
   - CONTACT PERSON:

3. **FACILITY (OWNER'S NAME) OWNER/OPERATOR:**
   - NAME:
   - ADDRESS:
   - CITY: STATE: ZIP:
   - PHONE #:
   - CONTACT PERSON:

4. **NAME OF FACILITY:** (FILL IN ADDRESS WHERE ABATEMENT PROJECT IS LOCATED)
   - ADDRESS:
   - CITY: STATE: ZIP:

5. (A) **ABATEMENT START DATE:** / /  
   (B) **COMPLETION DATE:** / /  
   
   *Month/Day/Year format*  
   
   (#6 only) **TO BE COMPLETED IF PROJECT IS GREATER THAN 160 SQUARE FEET**
   
   Notification Fee Due: $100.00 + 1% total asbestos abatement cost

6. **TOTAL ABATEMENT PROJECT COST:**  
   *REVISED COST (ONLY FOR REVISIONS):*

7. **USE OF FACILITY:**
   - A. SCHOOL (K-12)
   - B. PUBLIC BUILDING
   - C. MANUFACTURING
   - D. OFFICE
   - E. COLLEGE
   - F. COMMERCIAL
   - G. CHURCH/SYNAGOGUE
   - H. RESIDENTIAL, # OF DWELLINGS
   - I. OTHER
   
   *(I. SPECIFY)*
8. **BUILDING DATA:**  
| SQUARE FEET: | NUMBER OF FLOORS: | AGE: |

9. **ABATEMENT CLASSIFICATION:**  
| RENOVATION | DEMOLITION | ORDERED DEMO (AGENCY ISSUING ORDER) MUST ATTACH COPY OF DEMO ORDER |

10. **ABATEMENT TECHNIQUE:**  
| A. FULL CONTAINMENT WITH NEGATIVE AIR (IF AWP, include) | Project Designer & LICENSE # | B. ALTERNATIVE WORK PRACTICE (PRE-APPROVAL REQUIRED) |
| C. EXTERIOR ABATEMENT | D. SPOT REPAIR (>25 SQ. FT. TOTAL) |

11. **ABATEMENT METHOD:**  
| A. REMOVAL | B. ENCAPSULATION | C. ENCLOSURE |

12. **TYPE OF DECONTAMINATION SYSTEM:**  
| A. CONTIGUOUS | B. REMOTE | C. BOTH |

13. **TYPE AND AMOUNT OF ASBESTOS TO BE ABATED: (REPORTED IN SQUARE FEET)**  

<table>
<thead>
<tr>
<th>FRIABLE MATERIAL</th>
<th>NONFRIABLE MATERIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category I</td>
<td>Category II</td>
</tr>
<tr>
<td>A. SPRAYED /TROWELED ON:</td>
<td>I. FLOOR COVERINGS/TILES:</td>
</tr>
<tr>
<td>B. BOILER INSULATION:</td>
<td>J. ROOFING, SPECIFY:</td>
</tr>
<tr>
<td>C. TANK INSULATION:</td>
<td>K. GASKETS, PACKINGS:</td>
</tr>
<tr>
<td>D. BREECHING INSULATION:</td>
<td></td>
</tr>
<tr>
<td>E. DUCT INSULATION:</td>
<td></td>
</tr>
<tr>
<td>F. CEILING TILES:</td>
<td></td>
</tr>
<tr>
<td>G. OTHER, SPECIFY:</td>
<td></td>
</tr>
<tr>
<td>H. PIPE INSULATION:</td>
<td>Use conversion table</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(Pipe diameter) &quot;</th>
<th>Multiply LF by CF</th>
</tr>
</thead>
<tbody>
<tr>
<td>= Total Square Feet</td>
<td></td>
</tr>
</tbody>
</table>

14. **WASTE DISPOSAL SITE (IF MULTIPLE SITES, LIST SEPARATELY)**  

<table>
<thead>
<tr>
<th>NAME:</th>
<th>ADDRESS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY, STATE, ZIP:</td>
<td>OWNER, OPERATOR:</td>
</tr>
</tbody>
</table>

15. **HAULER/ WASTE TRANSPORTER**  

<table>
<thead>
<tr>
<th>NAME:</th>
<th>ADDRESS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY, STATE, ZIP:</td>
<td></td>
</tr>
</tbody>
</table>

Signature and Title of Person Completing this Form:

**Mail to:**  
DPH  
ASBESTOS PROGRAM  
410 CAPITOL AVENUE, MS # 51 AIR  
PO BOX 340308  
HARTFORD CT 06134-0308
This form is to be completed and postmarked or hand delivered to the Connecticut Department of Public Health at least ten (10) days prior to the start of demolition as required by the Regulations of Connecticut State Agencies (RCSA), Section 19a-332a-3. Each demolition notification must be accompanied by a fee of FIFTY ($50) dollars. A check in that amount made payable to "Treasurer, State of Connecticut" must be submitted with the notification form. In case of emergency notifications, this form is to be completed and postmarked or hand delivered within one (1) working day following the start of demolition. A copy of the written order requiring demolition prepared by a state or local building official shall accompany each emergency demolition notification. Faxed originals are not acceptable. Revisions to the original notification form may be faxed. Further instructions are found on back of this form.

1. **TYPE OF NOTIFICATION:**
   - A. NEW
   - B. EMERGENCY
   - C. REVISED
   - ITEMS REVISED:

2. **FACILITY OWNER:**
   - NAME:
   - ADDRESS:
   - CITY:        STATE:
   - ZIP:        PHONE NO.:

3. **LOCATION OF FACILITY TO BE DEMOLISHED:**
   - NAME:
   - ADDRESS:
   - CITY:        STATE:
   - ZIP:        PHONE NO.:

   HAS AN ASBESTOS INSPECTION BEEN CONDUCTED?  YES ☐  NO ☐

4. **INSPECTION INFORMATION:**
   - NAME OF INSPECTOR:
   - LICENSE #:        DATE OF INSPECTION:
   - INSPECTOR ADDRESS:       CITY:
   - STATE:        ZIP:        PHONE NO.:

   (Inspection information applicable to facilities subject to the asbestos NESHAP, 40 C.F.R., Part 61)

In accordance with Section 61.145 of the U.S. Environmental Protection Agency's National Emission Standards for Hazardous Air Pollutants (NESHAPs) regulation, the owner or operator of a facility shall, prior to the commencement of renovation or demolition, inspect the affected portions of the facility for asbestos, including Category I and Category II nonfriable asbestos.

5(A.) **DEMOLITION START DATE:**

5(B.) **DEMOLITION COMPLETION DATE:**

Phone: (860) 509-7367/ Fax (860) 509-7378
Telephone Device for the Deaf: (860) 509-7191
410 Capitol Avenue, MS# 51 AIR
P.O. Box 340308
Hartford, CT 06134-0308
Affirmative Action / An Equal Opportunity Employer
**6. USE OF FACILITY:**

<table>
<thead>
<tr>
<th>A. SCHOOL (K-12)</th>
<th>B. PUBLIC BUILDING</th>
<th>C. MANUFACTURING</th>
<th>D. OFFICE</th>
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<td>H. RESIDENTIAL, # OF DWELLINGS</td>
<td>I. OTHER</td>
<td></td>
</tr>
</tbody>
</table>

(1. SPECIFY)

**7. BUILDING DATA:**

<table>
<thead>
<tr>
<th>SQUARE FEET</th>
<th># OF FLOORS</th>
<th>AGE</th>
</tr>
</thead>
</table>

**8. DEMOLITION CONTRACTOR:**

- NAME:
- CONTACT PERSON:
- ADDRESS:
- CITY:
- STATE:
- ZIP:
- PHONE NO.:

**9. DEMOLITION DISPOSAL FACILITY:**

- NAME:
- ADDRESS:
- CITY:
- STATE:
- ZIP:
- PHONE NO.:

**10. DEMOLITION WASTE HAULER:**

- NAME:
- ADDRESS:
- CITY:
- STATE:
- ZIP:
- PHONE NO.:

**11. PERSON COMPLETING THIS FORM:**

- NAME:
- ADDRESS:
- CITY:
- STATE:
- ZIP:
- PHONE NO.:

**SIGNATURE**

**DATE:**

The submission of the Notification of Demolition Form is not required provided that an Asbestos Abatement Notification Form was previously submitted to the Department of Public Health involving abatement related to the demolition of the facility. In that case, the Asbestos Abatement Notification Form submitted to the agency satisfied the notification requirement for demolition of the facility. In all cases of demolition, one and only one form (Notification of Demolition Form or Asbestos Abatement Notification Form, as applicable) shall be sufficient to satisfy the Department of Public Health notification requirements detailed in Section 19a-332a-3 of the RCSA.