



Building & Safety Division
100 Civic Center Drive
Lake Forest, CA 92630
(949) 461-3470

Asbestos Disclosure for Demolition Projects

Date: _____

Applicant Name: _____

Applicant Address: _____

Applicant Telephone Numbers: (Home) _____ (Cell) _____

Project Address: _____

Demolition Permit Application Number: _____

OWNER:

I declare that I am the owner-occupant of the single-unit dwelling and I will personally conduct renovation/demolition activity at the dwelling. Written asbestos notification is not applicable to the demolition project (AQMD Rule 1403.j.9)

CONTRACTOR:

I declare that the demolition of the structure which job address is listed above may involve demolition or removal of asbestos material, and attached is a copy of each written asbestos notification regarding the building that has been required to be submitted to the South Coast Air Quality Management District (<http://www.AQMD.gov>). (Health & Safety Code Section 19827.5)

Signature of Authorized Agent or Owner or Contractor: _____