

Official Use Only
 Paid: \$
 Check/M.O. #:
 Date:



VERMONT
DEPARTMENT OF HEALTH
 ENVIRONMENTAL HEALTH
 Asbestos and Lead Regulatory Program
 108 Cherry Street, P.O. Box 70
 Burlington, VT 05402

Permit Application for Lead Abatement Project

(Refer to the [Vermont Regulations for Lead Control \[VRLC\]](#) for complete rules on notification)

Fill out application COMPLETELY and email it to: AHS.VDHALRPGeneral@Vermont.gov
 Mail payment with a copy of this application to the address above. DO NOT email scans of payment.

Check or M.O. # _____

Original Revision (date)_____ If Revision: Permit #_____ Fee Amount: \$_____

Abatement Entity Name:		
Ph:	Fax:	Email:
Street Address:		City:
State:		Zip Code:

Abatement Entity VT License #:	License Expiration Date:
Project Designer Name/VT License #:	OR Source of Spec.:

Abatement Project Name:	Parcel ID:	
Street Address:		
City:	State:	Zip Code:

Facility Owner Name:	Ph:	Email:
Street Address:	City:	
State:	Zip Code:	

Facility is (check one):

- Target Housing
 Public Building
 Commercial/Industrial Building
 Superstructure

Total # of Units: *Total # of Units **to be Abated**:

Common Areas to be Abated: Yes No

*Abatement Activities to be Performed (check all that apply): **Interior** **Exterior**

- Component Removal
 Paint Stripping
 Encapsulation
 Enclosure

Other:

*Permit Revision Fee Applies

+ Project completion date must reflect anticipated date of successful final clearance.

** Failure to submit required documents may delay the review process.

*Project Start Date:
Work Schedule (if differs from M-F, 7 AM – 4 PM):

Completion Date:

*Waiver(s) Requested? Yes No

If yes, provide an attachment describing specifics as per [VRLC 5.1\(b\)](#).⁺⁺

*Interim Controls to be Performed (describe):

*Renovation Activities to be Performed (describe):

Name of On-Site Supervisor and VT License #:

Name of Clearance Consultant and VT License #:

Name and Address of Final Waste Disposal Site:

Will non-certified workers enter the abatement area prior to dust clearance ([per VRLC 5.5\(a\)](#))?

Yes No

Name(s) of Non-Certified Worker(s) Entering the Abatement area:

A **COMPLETE** list of exact locations, types and scope of activities must be attached to this application. Floor plans, specifications, and hazardous waste contingency plan (for non-residential projects) must be included.

Print

Signature

Date

Name and Signature of Notification Preparer

*Permit Revision Fee Applies

+ Project completion date must reflect anticipated date of successful final clearance.

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Revised 1/2020

VDH form L104