



Asbestos Permit Application User Guide

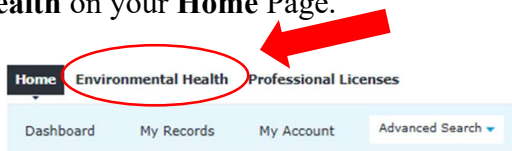
Thank you for reviewing ACHD's Asbestos Permit Application User Guide. This guide will walk through the steps required to complete the submission of an asbestos permit application for a project completed in Allegheny County.

Submitting an Asbestos Permit Application

1. Login to Accela using your credentials. If you are having issues with your account, please email achdasbestos@alleghenycounty.us.
2. Start at your **Home Page**. The **Home Page** is your "Front Page" containing a view of your Dashboard, Collections, and Records in addition to other options.



3. Click **Environmental Health** on your **Home Page**.



4. Read all information and disclaimers. To accept the terms and continue to the application, check the box and click **Continue Application**.

Create a Permit Application Search Permitted Facilities more ▾

Online Application

Welcome to Agency's Online Permitting System. Using this system you can submit and update information, pay fees, schedule inspections, track the status of your application, and print your final record all from the convenience of your home or office, 24 hours a day.

Please "Allow Pop-ups from This Site" before proceeding. You must accept the General Disclaimer below before beginning your application.

General Disclaimer

While the Agency attempts to keep its Web information accurate and timely, the Agency neither warrants nor makes representations as to the functionality or condition of this Web site, its suitability for use, freedom from interruptions or from computer virus, or non-infringement of proprietary rights. Web materials have been compiled from a variety of sources and are subject to change without notice from the Agency as a result of updates and corrections.

☐ have read and accepted the above terms.

Continue Application >>



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- Expand the selection under **Air Quality** to make **Asbestos Abatement Notification/ Permit Application** available. Select then click **Continue Application**.

Select a Record Type

Choose one of the following available record types. For assistance or to apply for a record type not listed below please contact us.

▼ **Air Quality**

- ☒ Asbestos Abatement Notification / Permit Application
- ☐ Memo Amendment / Secondary Permit

▶ Food Safety
▶ Housing and Community Environment
▶ Plumbing
▶ Solid Waste
▶ Water Pollution Control

- Read message under **Step 1** then click **Continue Application**.

Asbestos Abatement Notification / Permit Application

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Step 1: Getting Started > Important Information

Complete all applicable sections of the notification. To avoid a violation by failure to report, it would be prudent to submit a notification regardless of friability of materials. This form is used to satisfy the notification requirements of the following agencies:

- PA Department of Environmental Protection
- Allegheny County Health Department
- PA Department of Labor and Industry
- City of Philadelphia Department of Public Health
- US Environmental Protection Agency

Questions relative to specific filing requirements and enforcement regulations should be directed to the governing agency.

* Indicates a required field.



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7. Provide information regarding the Applicant and Property Owner. You may choose from a pre-existing account or add a new contact. The property owner must have an accurate and active email address. This will be how the owner will be able to complete an owner attestation to “sign” the permit.

Step 2: Project Information > Contact Information

* indicates a required field.

Applicant

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.



Property Owner

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.



8. If a licensed abatement contractor is conducting the work, the Allegheny County Licensed Abatement Contractor can be searched by clicking **Look up** and added to the application. **This is required for all permits.**

Abatement Contractor

To add your licensed professional information, click the **Select from Account**.
To find a licensed professional, click the **Look Up** button.



9. To search an Abatement Contractor, you may enter any accurate information to look up a licensed contractor. ACAL can be entered into **License Number** to browse for the correct contractor. Click **Look Up** to search.

Look Up License

License Type:	State License Number:	
<input type="text" value="Asbestos Abatement Cov"/>	<input type="text"/>	
First:	Middle:	Last:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Business:		
<input type="text"/>		
Address:		
<input type="text"/>		
City:	State:	Zip:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile Phone:	Home Phone:	
<input type="text"/>	<input type="text"/>	
<input type="button" value="Look Up"/>	<input type="button" value="Clear"/>	<input type="button" value="Discard Changes"/>



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10. Select the Licensed Asbestos Abatement Contractor then click **Continue**.

Look Up License x

Revise Search
Search results:
Showing 91-92 of 92

License Number	License Type	Licensed Professional Name	Business License #
<input checked="" type="radio"/> ACAL0	Asbestos Abatement Contractor		
<input type="radio"/> ACAL939	Asbestos Abatement Contractor		

< Prev 1 2 3 4 5 6 7 8 9 10 Next >

Continue Discard Changes

11. Complete the parcel or address fields and click **Search** to choose the project address.

Step 2: Project Information > Job Site Address * indicates a required field.

Project Address

Enter address information where the facility will be located and click "Search". Then select the facility address from the popup list.

* Street #: Prefix: * Street Name: Direction: Street Type:

City: State: * Zip: Municipality:

Search **Clear**

Parcel

* Lot and Block Number:

Search **Clear**



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12. The search will pull all GIS information linked to the address or parcel. Select the applicable address, parcel, and owner information. Click **Select**.

Address Search Result List

Associated Parcels

Showing 1-1 of 1

Lot and Block Number	Lot	Block	Subdivision
<input checked="" type="radio"/> 0049K00062000000			

Associated Owners

Showing 1-8 of 8

Name	Address
<input checked="" type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591
<input type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591
<input type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591
<input type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591
<input type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591
<input type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591
<input type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591
<input type="radio"/> COUNTY OF ALLEGHENY	542 FORBES AVE PITTSBURGH PA 15219-2591

Select **Cancel**

13. Once the information is populated into the address, parcel, and owner fields, click **Continue Application**.

Owner

Owner Name:

Address Line 1:

Address Line 2:

City: State: Zip:

Search **Clear**

Save and resume later **Continue Application »**



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14. Complete all applicable and required fields under **Project Information**, **Type of Operation**, and **Facility Description**.

Step 2: Project Information > Project Information

* indicates a required field.



Project Information

Project Information

Start Date:

MM/DD/YYYY



Enter the end date for the abatement:

MM/DD/YYYY



Type of Notification:

--Select--

Does this project require a permit:

☐ Yes ☐ No

Will alternative methods to any of the applicable regulations be used:

☐ Yes ☐ No



Type of Operation

Type of Operation

Check all that apply.

* Please select the Type of Operation:

--Select--



Facility Description

Facility Description

Job Number:

* Facility Name:

* Abatement Location (Unit, Apartment, Floor, etc):

* Present Use:

spell check

* Prior Use:

* Will the facility be occupied during the abatement activity:

☐ Yes ☐ No

* Facility size in square feet:

Square Ft

* Number of Floors:

* Age in years:



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15. If asbestos is being disturbed, please include the information in **Pennsylvania Certifications** for the staff conducting the work. Click **Continue Application**.

 **Pennsylvania Certifications**

Pennsylvania Certifications

Project Designer: <input type="text"/>	Project Designer Certification Number: <input type="text"/>
Contractor (Individual): <input type="text"/>	Contractor Individual Certification Number: <input type="text"/>
Supervisor: <input type="text"/>	Certification Number: <input type="text"/>
Contractor (Firm): <input type="text"/>	Certification Number: <input type="text"/>





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16. To add asbestos to a permit or notification, click **Add a Row**. Select if the project is regulated by NESHAP.

Asbestos Abatement Notification / Permit Application

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Step 2: Project Information > Asbestos

Please provide the Type of ACM, Description and Location of Material, Approximate amount of ACM, Type of Abatement and Final Clearance Air Method.

Under Article XXI, fees are calculated using the total quantity of ACM, in Square Feet, to be abated. Certain materials are commonly reported in linear feet or, in some cases, Cubic feet. Please convert any quantities of material reported in linear or cubic feet to square feet using the following equations, and include the original quantities and units in the chart below. Please note that all formulas use length measurements reported in feet (1 inch = 1/12 foot, or 0.083333 feet).

Pipe insulation:

$A = 3.14 \times (\text{outer Diameter}) \times \text{Length}$; measurements in feet

Duct Wrap:

$A = 2 \times (\text{Height} \times \text{Length}) + 2 \times (\text{Width} \times \text{Length})$; measurements in feet

Other materials in Linear feet (i.e. caulking) $A = L \times W$; measurements in feet

Material reported in cubic feet:

$A = (\text{quantity of material in Cubic Feet}) / 0.21875$

In the case of a demolition without a survey, enter the square footage of the structure. FOR ALL O&M AND ACM IN PLACE PERMITS, PLEASE INPUT 160 INTO ACM QUANTITY ONLY.

* indicates a required field.

ACM Description

ACM Description

Please provide the Type of ACM, Description and Location of Material, Approximate amount of ACM, Type of Abatement and Final Clearance Air Method. Under Article XXI, fees are calculated using the total quantity of ACM, in Square Feet, to be abated. Certain materials are commonly reported in linear feet or, in some cases, Cubic feet. Please convert any quantities of material reported in linear or cubic feet to square feet using the following equations, and include the original quantities and units in the chart below. Please note that all formulas use length measurements reported in feet (1 inch = 1/12 foot, or 0.083333 feet). Pipe insulation: $A = 3.14 \times (\text{outer Diameter}) \times \text{Length}$; measurements in feet Duct Wrap: $A = 2 \times (\text{Height} \times \text{Length}) + 2 \times (\text{Width} \times \text{Length})$; measurements in feet Other materials in Linear feet (i.e. caulking) $A = L \times W$; measurements in feet Material reported in cubic feet: $A = (\text{quantity of material in Cubic Feet}) / 0.21875$ In the case of a demolition without a survey, enter the square footage of the structure. FOR ALL O&M AND ACM IN PLACE PERMITS, PLEASE INPUT 160 INTO ACM QUANTITY ONLY.

Showing 0-0 of 0

ACM Type	Material Description	Other	Material Location	ACM Quantity (Square Feet)	Abatement Type	Final Clearance	ACM quantity if in LF or CF	Original ACM Units
No records found.								

Add a Row **Edit Selected** **Delete Selected**

NESHAP

NESHAP

* Is this project regulated by NESHAP? A project that includes the demolition of any defined "facility" is regulated by NESHAP. A renovation project is also regulated by NESHAP when the amounts of friable ACM, or ACM that may be rendered friable, are as follows: 260 LF or 160 SF or 35 CF.

☐ Yes ☐ No



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17. Once **Add a Row** is clicked, you may enter information regarding the ACM. **For O&M and ACM in place projects, enter 160 into ACM quantity.** Click **Submit** to add.

ACM Description ×

Please provide the Type of ACM, Description and Location of Material, Approximate amount of ACM, Type of Abatement and Final Clearance Air Method. Under Article XXI, fees are calculated using the total quantity of ACM, in Square Feet, to be abated. Certain materials are commonly reported in linear feet or, in some cases, Cubic feet. Please convert any quantities of material reported in linear or cubic feet to square feet using the following equations, and include the original quantities and units in the chart below. Please note that all formulas use length measurements reported in feet (1 inch = 1/12 foot, or 0.083333 feet). Pipe insulation: $A = 3.14 \times (\text{outer Diameter}) \times \text{Length}$; measurements in feet Duct Wrap: $A = 2 \times (\text{Height} \times \text{Length}) + 2 \times (\text{Width} \times \text{Length})$; measurements in feet Other materials in Linear feet (i.e. caulking) $A = L \times W$; measurements in feet Material reported in cubic feet: $A = (\text{quantity of material in Cubic Feet}) / 0.21875$ In the case of a demolition without a survey, enter the square footage of the structure. FOR ALL O&M AND ACM IN PLACE PERMITS, PLEASE INPUT 160 INTO ACM QUANTITY ONLY.

ACM Type: <input type="text" value="--Select--"/>	* Material Description: <input type="text" value="--Select--"/>	Other: <input type="text"/>
Material Location: <input type="text"/>	ACM Quantity (Square Feet): <input type="text"/>	Abatement Type: <input type="text" value="--Select--"/>
Final Clearance: <input type="text" value="--Select--"/>	ACM quantity if in LF or CF: <input type="text"/>	Original ACM Units: <input type="text" value="--Select--"/>

Submit [Cancel](#)

18. Add the Operation Schedule by clicking **Add a Row**.

Operation Schedules

Operation Schedules

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Operation Type	Start Date	Completion Date	Start Time	AM/PM	End Time	AM/PM	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Cor
No records found.														

Add a Row [Edit Selected](#) [Delete Selected](#)



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19. Once **Add a Row** is clicked, you may enter information regarding the Operation Schedule. Click **Submit** to add to the application.

Operation Schedules

* Operation Type: --Select--

* Start Date: MM/DD/YYYY

* Completion Date: MM/DD/YYYY

Start Time:

AM/PM: --Select--

End Time:

AM/ PM: --Select--

☐ Monday ☐ Tuesday

☐ Wednesday ☐ Thursday ☐ Friday

☐ Saturday ☐ Sunday

Comments:

spell check

Submit Cancel

20. Complete all required fields under Description of Work. Click **Continue Application** to proceed.

Work Description

Description of Work

* Description of planned demolition or renovation work:

spell check

* Description of Work Practices and engineering controls to be used to remove ACM and to prevent emissions of asbestos at the demolition and renovation site :

spell check

Save and resume later

Continue Application »



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21. To add other contractors related to the project including demo contractors, roofing contractors, and general contractors, click **Add a Row**.

Step 2: Project Information > Project Details * indicates a required field.

Contractor Information

Contractor Information
Provide contractor information

Showing 0-0 of 0

Contractor Type	Company Name	Address	City	State	Zip	Contact	Telephone
No records found.							

Add a Row **Edit Selected** **Delete Selected**

22. Once **Add a Row** is clicked, you may enter information regarding the contractor. Click **Submit** to add the contractor information to the application.

Contractor Information ×
Provide contractor information

Contractor Type:

Company Name:

Address:

City:

State:

Zip:

Contact:

Telephone:

Submit **Cancel**



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23. Complete all applicable and required fields under **Facility Owner** and **Inspection**. Click **Continue Application** to proceed.

Facility Owner

Facility Owner

Owner Name:

Street/Rural/POB Address:

City:

State:

Zip:

Contact:

Telephone No. (between 8:00 & 4:30):

Facility Inspection

Facility Inspection

* Is any type of asbestos present?: ☐ Yes ☐ No

* Has a thorough Asbestos Survey been completed by a licensed building inspector?: ☐ Yes ☐ No

Building Inspector:

Certification Number:

Date of Inspection:

* Is any material assumed to be asbestos?: ☐ Yes ☐ No

NVLAP Certification Number:

Procedure, including analytical method, if appropriate, used to detect the presence of asbestos material:

spell check

* Building is ID and in danger of collapse. If entire building is treated as asbestos containing, an asbestos contractor must be on site throughout demolition: ☐ Yes ☐ No

24. To add Waste Transporter information to the application, click **Add a Row**.

Waste Transporters

Waste Transporters

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Transporter Name	Address	City	State	Zip	Contact	Telephone
No records found.						



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25. Once **Add a Row** is clicked, you may enter information regarding the Waste Transporter. Click **Submit** to add the contractor information to the application.

Waste Transporters

Transporter Name: Address: City:

State: Zip: Contact:

Telephone:

Submit Cancel

26. To add Waste Disposal Site information to the application, click **Add a Row**.

Waste Disposal Sites

Showing 0-0 of 0

Landfill Name	DEP Permit Number	Street Address	City	State	Zip	Contact	Phone
No records found.							

Add a Row **Edit Selected** **Delete Selected**

27. Once **Add a Row** is clicked, you may enter information regarding the Waste Transporter. Click **Submit** to add the contractor information to the application.

Waste Disposal Sites

Landfill Name: DEP Permit Number: Street Address:

City: State: Zip:

Contact: Phone:

Submit Cancel



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28. Complete all applicable and required fields under **Air Monitoring Firms**. Click **Continue Application** to proceed.

Air Monitoring Firms

Air Monitoring Firms

* Company Name / Individual:

* City:

* Zip:

* Telephone:

* Street Address:

* State:

* Contact:

* Are you using a different Final Clearance Firm:

☐ Yes ☐ No

Final Clearance Firm (if different than above):

If other, please explain:

City:

Zip:

Phone:

* Final clearance firm was hired by:

Street Address:

State:

Contact:

Save and resume later

Continue Application »

29. Any Emergency Renovation or Ordered/ Emergency Demolition must fill out the information under either Emergency Renovations or Ordered Demolitions. These are not required fields for all other permits and notifications.

Step 2: Project Information > Additional Information

* indicates a required field.

Emergency Renovations

Emergency Renovations

Ordered Demolitions

For Ordered Demolitions

Attach copy of order

Is the building residential or commercial?:

Government agency that ordered:

Name of individual who ordered:

Title:

Date of Order:

Date ordered to begin:



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30. Complete all applicable and required fields under **Unexpected Event**. Click **Continue Application** to proceed.

Unexpected Event

Unexpected Event Procedures

Description of procedures to be followed in the event that unexpected asbestos is found or previously nonfriable asbestos material becomes crumbled, pulverized, or reduced to powder:

spell check

Save and resume later

Continue Application »

31. Add any required attachments including asbestos surveys, pictures, demolition orders from municipalities, etc. by clicking **Add**.

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Step 3: Supporting Documentation > Supporting Documentation * indicates a required field.

Attachments

The maximum file size allowed is 100 MB.
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;jse;jse;lib;lnk;mde;mht;mhtml;msc;msp;mst;php;pif;scr;set;shb;s are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

Add

32. Click **Add** again to choose your file to upload. Once selected. Click **Continue**.

File Upload X

The maximum file size allowed is 100 MB.
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;jse;jse are disallowed file types to upload.

850ebaf6-9f70-4654-a858- 100%

Continue Add Remove All Can



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33. Select the file type and add any description to the attachment. Click **Save** to link the attachment to the application. Click **Continue Application** to proceed.

*Type: --Select-- Remove

File:
850ebaf6-9f70-4654-a858-1f26c89355d7.jpg
100%

Description:

Spell check Save Add Remove All

Save and resume later Continue Application >>

34. Review your application for accuracy.

Asbestos Abatement Notification / Permit Application

1 2 Project Information 3 Supporting Documentation 4 Review 5 Pay Fees 6 Record Issuance

Step 4: Review

Save and resume later Continue Application >>

Please review all information below. Click the "Edit" buttons to make changes to sections or "Continue Application" to move on.

35. Ready the certification and check the box to agree. Click **Continue Application** to complete the application.

I HEREBY CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF 40 CFR PART 61 SUBPART M (if applicable) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING ALL WORKING HOURS, AND I CERTIFY THAT ALL WORK WILL BE DONE IN ACCORDANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL AGENCY RULES AND REGULATIONS.

☐ By checking this box, I agree to the above certification. Date:

Save and resume later Continue Application >>



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36. If your application is received successfully, a green confirmation message will appear.

Asbestos Abatement Notification / Permit Application

1 Getting Started	2 Project Information	3 Supporting Documentation	4 Review	5 Record Issuance
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Your application has been successfully submitted.
Please print your record and retain a copy for your records.

Thank you for using our online services.

37. After a completeness review, you will be invoiced via the portal where you can mail payment or pay online.



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