

**COMPLETION NOTIFICATION  
FOR  
REMOVAL OR ENCAPSULATION OF ASBESTOS**



Complete and return with fee check to:

**EPD - Asbestos Fees  
P. O. Box 101173  
Atlanta, Georgia 30392**

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**I. PROJECT INFORMATION:**

Asbestos Project: \_\_\_\_\_  
Project Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: Georgia County: \_\_\_\_\_ Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Removal Contractor (Agent Name): \_\_\_\_\_ License No/Expiration: \_\_\_\_\_  
Removal Contractor/Company Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_

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**II. FEE SCHEDULE**

Removal Fee: Ten cents (\$.10) per linear or square foot of friable asbestos  
Minimum Fee: \$25.00 (any friable asbestos project)  
Maximum Fee: \$50.00 (residential friable asbestos project)  
Maximum Fee: \$1000 (other friable asbestos projects)

**ACTUAL REMOVAL:**

\_\_\_\_\_ Linear Feet / Square Feet

Original Fee Paid: \$ \_\_\_\_\_ Check Number: \_\_\_\_\_ EPD Deposit Number: \_\_\_\_\_

Actual Fee Due: \$ \_\_\_\_\_ Check Number: \_\_\_\_\_ EPD Deposit Number: \_\_\_\_\_

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**III. LANDFILL INFORMATION:**

Landfill Name: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Volume of Asbestos Disposed: \_\_\_\_\_ SQ/FT \_\_\_\_\_ LN/FT \_\_\_\_\_ CU/YD

Type of Containers: \_\_\_\_\_

Were Containers Labeled "Asbestos Waste": EPA/OSHA: Yes: \_\_\_\_\_ No: \_\_\_\_\_

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**IV. CERTIFICATION**

**I certify that this project was conducted in accordance with the disposal and work practices of the Georgia Rules for Asbestos Removal and Encapsulation, 40 CFR Part 61.140-61.156, and the Georgia Rules for Solid Waste Management.**

\_\_\_\_\_  
Agent Signature / Title

\_\_\_\_\_  
Date