

NEBRASKA FIRE TRAINING DEMOLITION NOTIFICATION

1. Type of Notification (circle): Original Revised Canceled

2. Fire Department Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact: _____ Telephone: _____

3. Structure Owner Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact: _____ Telephone: _____

4. Structure Information: _____
Address: _____
City: _____ County: _____

5. Structure Size (square feet): _____ Number of Floors: _____
Age (years): _____ Present Use: _____

6. Was the structure inspected for asbestos containing materials? (circle) YES NO
Is asbestos present? YES NO Quantity of asbestos: _____
Asbestos removal contractor (if applicable): _____
Asbestos removal dates (if applicable): _____

7. Procedure (laboratory analysis method) used to check for the presence of asbestos-containing materials: _____

8. Description of procedures to be followed in the event unexpected asbestos-containing material is found: _____

9. Location of ash and burnt disposal: _____

*Ash and burnt debris must be disposed of in a permitted solid waste landfill.

10. Fire training dates: Start: _____ Complete: _____

Alternative training dates: Start: _____ Complete: _____

11. Was a permit obtained from the State Fire Marshal? (circle) YES NO

*To conduct a lawful fire training exercise, a permit must be obtained from the State Fire Marshal prior to the training

12. I certify that the above information is correct and that the above referenced fire training will be conducted in accordance with all State and Federal Regulations.

Signature

Date

Title

Submit to: Nebraska Department of Environment and Energy
Air Quality
PO Box 98922
Lincoln, NE 68509-8922
(402) 471-2189
FAX: (402) 471-2909

*PLEASE READ FIRE TRAINING POLICIES AND GUIDELINES