



CITY OF ST LOUIS DEPARTMENT OF HEALTH
AIR POLLUTION CONTROL
ASBESTOS POST- NOTIFICATION

GENERAL INSTRUCTIONS

Persons who perform asbestos abatement projects are required to submit post-notification to the department within 60 days of the completion date indicated on the initial notification. This post-notification shall include signed and dated receipts of asbestos disposal as well as final air clearance results (if applicable). These documents, along with the completed post-notification form shall be mailed to the following address*:

CITY OF ST. LOUIS DEPARTMENT OF HEALTH
AIR POLLUTION CONTROL
P.O. BOX 14702
ST. LOUIS, MISSOURI 63178

*For projects under the jurisdiction of a local agency, send post-notification to the appropriate office.

PART A. ASBESTOS PROJECT INFORMATION

PROJECT NAME	PROJECT ID ASSIGNED BY THE AIR POLLUTION CONTROL PROGRAM			
ADDRESS				
CITY			STATE	ZIP CODE
START DATE	COMPLETION DATE			

PART B. CONTRACTOR INFORMATION

NAME OF CONTRACTOR	MO ASBESTOS CONTRACTOR REGISTRATION NUMBER		
CONTRACTOR CONTACT PERSON	EMAIL	TELEPHONE NUMBER WITH AREA CODE	

PART C. WASTE DISPOSAL INFORMATION

NAME OF LANDFILL				
ADDRESS				
CITY			STATE	ZIP CODE

NOTE: INCLUDE COPIES OF ALL WASTE SHIPMENT RECORDS AND DISPOSAL RECEIPTS

PART D. AIR SAMPLING INFORMATION

NAME OF AIR SAMPLING PROFESSIONAL	CERTIFICATION NUMBER
COMPANY NAME	TELEPHONE NUMBER WITH AREA CODE

NOTE: INCLUDE COPIES OF FINAL AIR CLEARANCE RESULTS (IF APPLICABLE)

PART E. AUTHENTICATION

I CERTIFY THAT THE INFORMATION LISTED ABOVE AND ENCLOSED IS TRUE AND ACCURATE.

SIGNATURE OF ASBESTOS ABATEMENT CONTRACTOR	DATE
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