YOLO-SOLANO AIR QUALITY MANAGEMENT DISTRICT
1947 Galileo Court, Suite 103; Davis, CA 95618
www.ysaqmd.org   (530) 757-3650

Jurisdiction: _____

Air District Questionnaire

A building permit cannot be issued unless this questionnaire is completed and submitted to the YSAQMD for approval.
This questionnaire is used to determine if a project requires an asbestos survey and/or Asbestos Demolition/Renovation notification.

Date _____ Permit # _____ Project Name: _____

Address: _____ City: _____

Contractor Info:

Company: _____

Contact Name: _____

Email: _____

Telephone Number: _____

Owner Info:

Company: _____

Contact Name: _____

Email: _____

Telephone Number: _____

1. Describe the work scope (include drawings, demo plan & room numbers/names):

_____

_____

2. Project involves one non-commercial residential building?   ☐ Yes   ☐ No

3. Project is new construction only (no demolition or alteration of existing materials)?   ☐ Yes   ☐ No

4. Identify <u>existing</u> materials being disturbed or removed: ☐ None (new construction only)

☐ Flooring	_____ SF	☐ Ceiling	_____ SF	☐ Roofing	_____ SF/Squares
☐ Concrete	_____ SF	☐ Insulation	_____ SF	☐ Sheet Rock	_____ SF
☐ Plaster walls	_____ SF	☐ Exterior walls	_____ SF	☐ Pipe Insulation	_____ Linear Ft
☐ Other (Describe): _____				SF _____	

5. Are any load bearing walls or structural members being removed or demolished?   ☐ Yes   ☐ No

If "Yes":   ☐ Complete Bldg. demo   ☐ Repair/replace   ☐ Single structure
             ☐ Partial Bldg. demo   ☐ Moving structure   ☐ Several structures # _____

Total SF of demolition area: _____ SF

Printed name: _____ Signature: _____ Date: _____

(Your signature indicates that all information submitted is true, accurate and complete to the best of your knowledge)

Survey required? Submit questionnaire to the Building Dept. or directly to the District at notify@ysaqmd.org. Staff will review and notify you if survey report is needed. You may be contacted for additional information. Surveys must be performed by a certified Asbestos Consultant, CAC or Site Surveillance Tech, CSST (see survey advisory at http://www.ysaqmd.org/permits-advisories.php).

I wish to submit my questionnaire, survey report & fee. Deliver/mail hardcopy with check payable to YSAQMD to 1947 Galileo Ct., Ste. 103, Davis CA 95618. Send electronic submittals with proof of payment to payments@ysaqmd.org or fax to (530) 757-3670; make credit card payments at www.ysaqmd.org/permits/make-a-payment/ *(service fees apply).* To determine the applicable fee, see the fee schedule at https://www.ysaqmd.org/permits/forms-applications/ or consult the District. Regulated projects involving "friable" asbestos materials require a Notification form and waiting period (10 work days).

For more info, see www.ysaqmd.org/asbestos or call the District at (530) 757-3650.

DISTRICT USE ONLY:	
Fee Amt: _____	
Payment Amt: _____ (check ___ credit ___)	
Database Entry done: _____	
Date Rec: _____ Processed by: _____	

Questionnaire Rec: _____

Release Approved/Date: _____

Notes: _____

_____