

## THE CITY OF NEW YORK DEPARTMENT OF ENVIRONMENTAL PROTECTION

Bureau of Environmental Compliance 59-17 Junction Boulevard, 9th Floor Corona, New York 11368-5107

## **Registration for Demolition AR299**

Premises											
Address:	ss:		Borough:		Building or Structure Type:				Number of Stories:		er of Stories:
City:	State:	Zip Code:			Total Floor Area (Sq Ft):		Street F	Street Frontage (Ft):		Building Frontage (Ft):	
Demolition											
Approximately, how many days after receiving approval from both the Department of Buildings (DOB) and the Department of Environmental Protection (DEP) do you anticipate starting demolition?	/ weeks / n	ately, how ma nonths do yo	ou	Building Permit Number (if available):					Date Issued:		
	expect to be doing demolition?			Is a copy of the DOB Demolition Permit being submitted with this Registration?							
				☐ Yes ☐ No  If DOB Demolition Permit is NOT being submitted with this Registration, please submit a copy when received.							
Demolition Contractor											
Name of Company:							٦	Γelephor	ne:		
Address:							E	Borough: Zip Co			Zip Code:
Name of Person Supervising Demolition:						7	Title:				
Demolition Procedures											
Indicate precautions taken to prevent particulate r	natter from b	ecoming airb	oorne:								
Method of demolition to be employed:											
Asbestos											
	Wa	as this an	ACP7 (A	sbest	os Abatement	) Project	t?				
If You plaged provide data when project we		☐ Yes				□ No					
If Yes, please provide date when project was completed:				If No, please provide the name of the Asbestos In Asbestos Investigator:					vestigator who filed your ACP5 Form  Certificate Number:		
				Aspes	tos investigator.				Seruncate Number	ei.	
Firm Responsible for Filing Demolit	ion Regis	stration									
Name of Company:									Telephone:		
Address:							Borough:			Zip (	Code:
Name of Owner / Agent or Officer:	Owner / Agent or Officer: Title:			Signature:			Dat	e:			

Return completed Registration Forms AR299 & AR300 (in this package) to:

THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL COMPLIANCE, 9<sup>TH</sup> FLOOR
59-17 JUNCTION BOULEVARD
FLUSHING, NY 11373-5108

FOR DEPARTMENT USE ONLY						
Certificate of Registration Number:	DR					
Date Processed / Approved:						
Approved by (Examiner):						



Premises

Address:

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Carter H. Strickland Jr. Deputy Commissioner for Sustainability

Michael Gilsenan Assistant Commissioner Environmental Compliance

Number of Stories:

## Registration for Demolition AR300

Borough:

Approved Registration **Must be Displayed** in the Vicinity of Premises Below

Building or Structure Type:

City:	State:	Zip Code:	Total Floor Area (Sq Ft):	Street Frontage (Ft):		Building Frontage (Ft):		
Demolition				•				
Building Permit Number (if available):		Date Issued:						
Demolition Contractor				Telephone				
Name of Company:				ie:				
Address:	Borough:	Borough: Zip C						
Name of Person Supervising Demolition:	olition: Title:							
Demolition Procedures				'				
Indicate precautions taken to prevent particulate r	matter from b	pecoming airborne:						
Method of demolition to be employed:								
Asbestos								
		Indicate Type of F						
		ACP5	ACP	97				
Firm Responsible for Filing Demolit	ion Regis	stration		1-				
Name of Company:					Геlephone:			
Address:			В	orough:		Zip Code:		
Name of Owner / Agent or Officer:		Title:			Date:			
FOR DEPARTMENT US	SE ONLY							
Certificate of Registration Number: DR	₹							
Date Processed / Approved:								
					The Commissioner			
,								