



**City of Huntington Beach**  
Department of Community Development  
**Asbestos Disclosure Form**  
2000 Main Street, Huntington Beach, CA 92648  
Office: (714) 536 - 5241 Fax: (714) 374 - 1647

Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Project Address: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Phone Number: \_\_\_\_\_

Project Description: \_\_\_\_\_

\_\_\_\_\_

**Owner**

I declare that I am the owner-occupant of the structure and I will personally conduct renovation activity at the dwelling. Written asbestos notification is not applicable to the renovation project (Rule 1403.j.9) per AQMD guidelines.

**Contractor**

I declare that the building activities/demolition of the structure, which job address is listed above, may involve demolition or removal of asbestos material. A copy of each written asbestos notification regarding the building will be submitted by the contractor to the South Coast Air Quality Management District (<http://www.aqmd.gov>). (Health & Safety Code Section 19827.5)

**Owner/Contractor**

I declare that the building activities/demolition of the structure, which job address is listed above, does not involve demolition or removal of any asbestos material. Written asbestos notification is not applicable to this building and/or demolition project. (Health & Safety Code Section 19827.5)

**If the above demolition involves the taking of load bearing support members and/or load bearing walls, then SCAQMD notification is ALWAYS required.**

"I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct"

\_\_\_\_\_  
Signature of Authorized Owner or Contractor or Authorized Agent

\_\_\_\_\_  
Date