



ARIZONA DEPARTMENT OF TRANSPORTATION

ASBESTOS CLEARANCE REQUEST FORM

CLEARANCE TYPE REQUESTED:

- ASBESTOS SURVEY, DEMOLITION, RENOVATION, ASBESTOS ABATEMENT, REPAIR AND MAINTENANCE

Desired Completion Date: _____

Address of planned work: _____

Project Number: _____ Parcel Number: _____ Building Number: _____

Site Name: _____ Building Function Type: _____

Structure ID: _____ Beginning MP: _____ Ending MP: _____

Description of requested work: _____

Justification: _____

Special Instructions: _____

- Photos Attached, Floor Plan Attached, Site Plan Attached

Person requesting clearance: _____ Date: _____

Title: _____

Org Name: _____ Org #: _____ Phone Number: _____

Org Supervisor/Manager Signature: _____

Approved By: _____ Date: _____

Title: _____

RESPONSIBLE ASBESTOS MANAGEMENT GROUPS:

ENVIRONMENTAL PLANNING

Ed Green
Hazardous Material Coordinator
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RIGHT-OF-WAY GROUP:

Greg Rodriquez
Demolition Coordinator
ADOT Designated EPA/NESHAP Backup Contact
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GENERAL OPERATIONS GROUP:

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