



NYC DEPARTMENT OF ENVIRONMENTAL PROTECTION

Asbestos Control Program

59-17 Junction Boulevard, 8th Floor, Corona, NY 11368-5107

INSTRUCTION SHEET FOR THE ACP 5 FORM
(“NOT AN ASBESTOS PROJECT” NOTIFICATION FORM)

Only individuals certified as asbestos investigators by the Department can engage in building survey and hazard assessment for asbestos.

Enter the information as specified:

- Item 2. Facility Address, Borough, Zip Code, and Other Addresses or Designation for the Building
Item 3. Block #
Item 4. Lot #

- Item 5. The building owner is the person/entity that has title to the building. The owner, not the lessee, should be noted. A current telephone number is required.
Item 6. The building owner’s address
Item 7. A contact person for the building owner who is familiar with the scope of work.
Item 8. A current telephone number.

Item 9. The description of work to be performed refers to the entire scope of work including a summary of all details obtainable. All building components (e.g. ceiling, demising wall) and equipment items (e.g. HVAC duct, pipes) to be affected must be noted.

The word “demolition” must be avoided when the actual scope of work is interior or exterior renovation or “gut rehab” or an alteration or a plumbing repair.

Item 10. Estimated start and completion dates of the entire scope of work. If these dates are not obtainable, it is acceptable to enter “as soon as the permit is issued”. Do not omit this item.

When the work does not require the filing of a Building’s Department permit application, the dates must coincide with the start and completion of the asbestos work.

Item 11. The investigator’s name and the date of the investigation must be entered. The appropriate box must be checked.

With regard to boxes “a” through “e”:

- It is acceptable to check two boxes if so doing describes the survey results most accurately.
Boxes “a” or “b” should not be checked unless the premise is to be demolished.
Box “e” refers to the handling of asbestos containing roofing material, floor tile, shingles and/or transite panels. If the entire scope of work is only the abatement of normally non-friable ACM and a Department of Buildings permit is not required, then the ACP5 form may be filed directly with DEP.

In-Plant Operations, as defined in §56-3.1 of ICR 56, are not permitted in New York City. For work performed using this item, the work procedures must be in accordance with:

Table with 2 columns: Material type and AV code. Rows include Shingle siding (AV 89), Roof flashing (AV 119), Built-up roofing (AV 119), Transite roofing (AV 119), Roof shingles (AV 119), and Floor tile & Mastic (AV 120).

Any variations from these procedures requires the filing of an ACP7 form, and a site specific variance application (ACP9 form) with the Department.

When these types of ACM are damaged or in poor condition (e.g. roofing after a fire), they must be filed on an ACP7 form (Asbestos Project Notification, Asbestos Inspection form). The asbestos investigator is responsible for the performance of a proper hazard assessment of the material prior to signing and affixing his/her seal.

The removal of more than 10 square feet or more than 25 linear feet of friable ACM requires the filing of an ACP 7 form. ACP5 forms must be submitted at the Department of Buildings. NYC DEP only accepts ACP5 forms where box “e” has been checked.

- Box “e” and “f” require the insertion of the square or linear footage of material.

Item 12. An additional sheet may be attached for the 7-row tabulation. Unusual situations or special notes may be noted on the back of the form. Attachments should be in a similar format and should not include the complete survey and building assessment records specified by the Asbestos Rules.

Descriptions of floor sections should be specific. All friable and normally non-friable ACM that may be affected by the work must be listed. The number of samples collected for each material type should be listed separately. If the material is presumed to be ACM, the assumed ACM column should be checked.

Check box "b", "d" or "f" as appropriate, based on the quantity of material. When checking box "f", the quantity must be entered.

Items 13, 14. The name of the laboratory used to analyze bulk samples, ELAP #, and/or NVLAP#.

Item 15. The date bulk samples were analyzed.

Item 16. The NYCDEP asbestos investigator signature, certification number, date, and telephone number are required. Investigators with renewed certifications should enter the number from the valid certification. An expired certification number should not be entered. Original signature is required.

All forms must have the seal of the NYC DEP Certified Asbestos Investigator. Certified Investigators may use a valid "professional engineer" or "registered architect" seal in lieu of an asbestos investigators seal.

*ACP5 forms are notification forms and are **not** survey reports. Investigators must maintain adequate backup documentation. A detailed survey report is required for each and every asbestos survey. Asbestos survey records must accurately reflect the site conditions at the time of investigation. Asbestos investigators must maintain a permanent record (survey report) for every building survey/hazard assessment for asbestos. For each building survey/hazard assessment conducted prior to preparation of either DEP form ACP7 or ACP5, the investigator must compile a record that includes at a minimum:*

- A detailed written description of procedures employed to detect the presence or absence of ACM.
- A blueprint, diagram, drawing, or written description of each building or portion thereof inspected by the investigator that clearly identifies each location and approximate linear or square footage of any area where material was sampled for ACM.
- The exact locations where bulk samples were collected, the date of collection, and the location of any areas assumed to have ACM.
- The printed name and signature of any and all persons who collect bulk samples for the purpose of determining the presence of ACM.
- The name and address of the laboratory analyzing the samples, the date of analysis, the results of the analysis, the method of analysis and the name and signature of the person performing the analysis.
- A detailed written description of proposed demolition, renovation, alteration, or modification work to be performed, including the techniques to be used and a description of affected facility components.
- A specific description of all activities performed by non-certified individuals, including name, address, telephone number.

NOTE: Only typewritten forms will be accepted. To facilitate this, you can fill out the form fields directly in Acrobat and print out the result.