



Demolition Waste Application and Release Authorization

FOR OFFICE USE ONLY

Date Received: _____

Check Number: _____

Field 1: _____

Important: Please refer to back of application for further instructions. One application should be submitted for each address that will be demolished with a \$50.00 application fee for each structure that is 120 square feet and larger. Payment by mail may be in the form of a check or money order made payable to St. Louis County Department of Health. *Blank spaces are not permitted. If any item is not applicable (N/A) the space should be marked accordingly. Allow for a minimum of seven (7) working days to process.*

Site Information (Regis #): _____ County Locator ID #: _____

Street Address _____ Zip code _____ Municipality _____ Owner Occupied Yes No

Date of demolition: ____/____/____ No. of Structures (≥120 ft²): _____ Commercial: Yes No If yes, complete a Commercial Property checklist

Type of Structure: _____

Applicant/Contractor Information

Applicant: _____ Phone # (____) _____

Applicant Contact Name (Printed) _____ Email _____

Street Address: _____ City _____ State _____ Zip Code _____

Demolition Contractor: _____ Phone # (____) _____

Hauling Company: _____ County ID# _____ Phone # (____) _____

Disposal Facility: _____ Phone # (____) _____

Approved Application Pick-up Option: Phone Call Email Mail

Recycling plan: Yes No If yes, list materials for recycling _____

I would like additional information on demolition waste recycling Yes No

Applicant Signature

I certify that I have read the regulations provided with this application and shall abide by said rules. That the information I have provided is true to the best of my knowledge.

Applicant Signature _____ Date _____

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The Saint Louis County Department of Health does hereby certify that the applicant stated herein has satisfied all departmental requirements and is approved for said Demolition.

Approved: _____	Approved: _____
DOH Waste Management Agent Signature	DOH Air Pollution Control Agent Signature
_____	_____
DOH WMP Agent (Print Name)	DOH APCP Agent (Print Name)
_____	_____
Date	Date


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St. Louis County Department of Public Health
Environmental Services Division

DEMOLITION WASTE APPLICATION AND RELEASE AUTHORIZATION

	COMMERCIAL	RESIDENTIAL	
	Commercial or Residential Buildings Having 5 or More Dwelling Units	Residential structures >120 ft ² (<5 dwellings) On one parcel of land	Residential structures >120 ft ² (<5 dwellings) On 2 or more parcels of land-Part of a project
Demolition Waste Application and Release Authorization Form*	✓ (\$50.00 Fee per Structure)	✓ (\$50.00 Fee per Structure**)	✓ (\$50.00 Fee per Structure)
Asbestos NESHAP Notification of Demolition and Renovation Form	✓ (\$100.00 Fee per Structure)		✓ (\$100.00 Fee per Structure)
Asbestos Inspection Report	✓ (Abatement Required prior to demolition)	✓ (Abatement Required prior to demolition)	✓ (Abatement Required prior to demolition)
Commercial Structure Checklist	✓		

* Structures less than 120 square feet are exempt from requirement to apply for and obtain demolition authorization only.

** Owner-occupied residential property owners conducting his/her own demolition at said residence shall be exempt from payment of the fifty dollar (\$50.00) fee.

The following is a list of regulations that apply to all demolitions (this list is not inclusive of all local, state and federal regulations that may apply):

607.130 Demolition and Construction Waste

607.250 Design and Construction of Vehicles and Mobile Waste Containers Used to Transport Waste

607.250 Waste Must be Deposited at a Licensed landfill, Licensed Waste processing Facility, Licensed Transfer Station, Licensed Compost Facility, or Licensed yard By-Product Compost Facility

607.865 Application for Generation of Demolition Waste

10 CSR 10-6.170 Restriction of Particulate Matter to the Ambient Air Beyond the Premises of Origin