

BUILDING DEMOLITION PERMIT APPLICATION

****Note:** This form is to be completed only by the LEA Asbestos Designated Person.

PARISH: _____ DATE: _____

FACILITY NAME: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DEANERY: _____ COUNTY: _____

DESIGNATED PERSON: _____

DEMOLITION CONTRACTOR: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____

As the demolition contractor, I hereby certify the following: My company and all subcontractors have been given complete access to building asbestos report(s) and management plan(s) in conjunction with the identification and locations of Asbestos-Containing Materials (ACM) for this facility. After the review of this material, and with the assistance of the Asbestos Designated Person (DP), I understand all types and locations of ACM present and will not disturb the ACM in any way which would cause it to become friable. Furthermore, I promise to "wet" all building materials prior to the commencement of demolition and during the demolition when necessary.

To the fullest extent permitted by law, the contractor shall indemnify and hold harmless the Diocese of La Crosse, and its agents and employees from and against claims, damages, losses and expenses, arising out of or resulting from the contractor's performance of the demolition work but only to the extent caused by the negligent acts or omissions of the contractor, a subcontractor, anyone directly or indirectly employed by them or anyone for whose acts they may be liable, regardless of whether or not such claim, damage, loss or expense is caused in part by a party indemnified hereunder.

If at any time, during the course of this project, I myself or any of my representatives discover unknown or previously concealed sources of Presumed Asbestos Material (PCM), I agree to stop all demolition proceedings and notify the designated person responsible.

I also agree to follow all federal, state, and local laws pertaining to the disposal of all the demolition materials from this project.

Additionally, I agree to provide the necessary notification to all governmental agencies which require notification by law or courtesy.

Finally, I agree to provide a copy of the waste disposal manifest to the designated person responsible and the Diocese of La Crosse.

DEMOLITION CONTRACTOR SIGNATURE: _____

DATE: _____

DESIGNATED PERSON SIGNATURE: _____

DATE: _____

DIRECTOR, DIOCESAN BUILDINGS & GROUNDS SIGNATURE: _____

DATE: _____