



STATE OF NEW YORK – DEPARTMENT OF LABOR
DIVISION OF SAFETY AND HEALTH
ENGINEERING SERVICES UNIT
STATE OFFICE CAMPUS
ALBANY, NY 12240

PETITION FOR AN ASBESTOS VARIANCE
(NOT APPLICABLE FOR PUBLIC EMPLOYERS)

Petitioner (Property Owner) 1. Name			Petitioner's Agent 8. Name		
2. Address			9. Address		
3. City	4. State:	5. Zip	10. City	11. State	12. Zip
6. Telephone Number	() -		12. Telephone Number	() -	
7. Fax Number	() -		13. Fax Number	() -	

15. Petitioner or Agent Holds:

- a. Asbestos Contractor – License No _____
b. * Project Designer - Certificate No. * Required _____

16. Petitioner's Federal Employer Identification Number (FEIN) _____

17. Affecting Premises Know As	18. Street Address of Premises City State Zip
19. These premises are situated on the _____ side of _____ north-east-south-west street-avenue-road	
In the (check one) ____ CITY ____ TOWN ____ VILLAGE OF _____ County of _____	

**THE PETITIONER HEREBY PETITIONS THE COMMISSIONER OF LABOR FOR A VARIANCE
FROM THE REQUIREMENTS OF INDUSTRIAL CODE RULE (ICR) 56.**

20. Order to Comply/Notice of Violation: _____ No _____ Yes If Yes, enter date issued	21. Issued to: ____ Owner ____ Agent ____ Lessee Enter name appearing on Notice of Violation/Order to Comply:
22. Quote the ICR Citations as given on the Notice of Violation/Order to Comply, if applicable.	
23. If a variance has been granted previously for work closely resembling this project, list variance number and date such variance was granted	
This space left blank for possible anchors.	
Complete front and back of application: be sure to sign and date all copies.	

VARIANCE PROPOSAL FORM

Contractors applying for an asbestos variance must provide the following information. All fields required to be answered. **A separate form must be completed for each work area** (e.g. If you are multiple rooms in a building a separate form must be completed for each room).

Page ____ of ____ pages

1. Building Description

a) Owner of the Building	b) Is the building occupied <input type="checkbox"/> Yes <input type="checkbox"/> No	c) Building Square footage	d) No. of stories or height
d) Current function of the building:			
e) What is within 25 ft of all four sides of the building (e.g. side walk, alley, land, other building) North South East West			

2. Work Area Description

a) <table border="1"><tr><td><input type="checkbox"/></td><td>Interior Work Area</td></tr><tr><td><input type="checkbox"/></td><td>Exterior Work Area</td></tr></table>	<input type="checkbox"/>	Interior Work Area	<input type="checkbox"/>	Exterior Work Area	b) If interior work area, what is room dimension and/or area in square feet	
<input type="checkbox"/>	Interior Work Area					
<input type="checkbox"/>	Exterior Work Area					
c) Type of material to be abated:		d) Quantity of material to be abated				
e) Condition of abated material (e.g. the level of deterioration and/or damage of material)		f) <table border="1"><tr><td><input type="checkbox"/></td><td>Friable Material</td></tr><tr><td><input type="checkbox"/></td><td>Non-friable Material</td></tr></table>	<input type="checkbox"/>	Friable Material	<input type="checkbox"/>	Non-friable Material
<input type="checkbox"/>	Friable Material					
<input type="checkbox"/>	Non-friable Material					
g) Type of containment proposed.						

3. Hardship Description

a) What is the hardship (e.g. limited room fro decons, dry removal necessary due to electrical or steam service, project schedule constraint, etc.)

4. Proposed Abatement Method Description

a) What proposed abatement method and increased engineering controls will be used to compensate for the relief being sought (e.g. increased negative air rate, negative pressure glovebag/golvebox, etc)

b	<input type="checkbox"/>	Proposed method will render non-friable ACM material friable
	<input type="checkbox"/>	Proposed method will not render non-friable ACM material friable

5. ICR 56 Relief Sought

a) List the applicable sections of ICR 56 for which relief is sought

6. Certification

I certify that the information contained in this Petition is true and accurate to the best of my knowledge

Date

Signature