

Pre-demolition Building Inspector Registration Form

Water Quality and Hazardous Waste Bureau, Environmental Health Division 788 East Woodoak Lane; Murray, UT 84107
Phone: 385-468-3862; Fax: 385-468-3861

		Section 1: Applic	cant Information			
Last Name		First Name and Middle Initial		Phone Number		
Mailing Address		City		State	ZIP Code	
Email Address		Utah State Asbestos Certification Number			lumber	
		Section 2: Emplo	oyer Information			
Self-employed?] Yes □ No	Employer Name		 Pr	one Number	
Mailing Address		City		State	ZIP Code	
Email Address			Utah State Asbestos Certification Number			
	<u>s</u>	ection 3: Second E	mployer Informatio	o <u>n</u>		
Self-employed?] Yes □ No	Employer Name	Pho		none Number	
Mailing Address		City		State	ZIP Code	
Email Address			Utah State Asbes	h State Asbestos Certification Number		
	er certify that I wi	provided in this appl Il comply with all requ 4.4.				
Signature			 Date			
	HEALTH	I DEPARTMENT USE	ONLY			
 Date received	Invoice #	Expiration D	PBI- ate Reg. #			