



**TOWN OF WAYLAND**  
MASSACHUSETTS  
01778  
**BUILDING DEPARTMENT**

TOWN BUILDING  
41 COCHITUATE ROAD  
TELEPHONE (508) 358-3600

Mike Crisafulli  
BUILDING COMMISSIONER

**SOLID WASTE DISPOSAL FORM**  
**ASBESTOS ABATEMENT INFORMATION AFFIDAVIT**

As a condition of issuing a permit for the construction, demolition, renovation, rehabilitation or other alteration of a building or structure, M.G.L. c. 40, § 54, requires that the debris resulting there from shall be disposed in a properly licensed solid waste disposal facility as defined by M.G.L. c. 111, § 150A and 310 CMR 7.15 when applicable.

I hereby acknowledge that the referenced building permit issued to construct, demolish, renovate, rehabilitate or alter a building or structure is conditioned on compliance with M.G.L. c. 40, § 54.

\_\_\_\_\_  
Construction Site Address

\_\_\_\_\_  
Name and Location of Solid Waste Disposal Facility

\_\_\_\_\_  
Signature of Permit Applicant

\_\_\_\_\_  
Date:

**ASBESTOS ABATEMENT INFORMATION AFFIDAVIT (if applicable)**

For all work to be permitted and controlled by 310 CMR 7.15 in an owner-occupied, single family residence.

As owner of an owner-occupied, single family residence I am claiming the owner exemption as controlled by 310 CMR 7.15. Any non-friable Asbestos Abatement work not performed by the single family owner shall require notification to the Health Department prior to any asbestos abatement work being performed.

\_\_\_\_\_  
Signature of Owner

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