

Division of Safety and Health
Asbestos Notification Unit
1220 Washington Ave.
Building 12, Room 161B
Albany, NY 12226



Date: ____ / ____ / ____

Project Address:

Invoice - Asbestos Notification

Final Notice

Submit a fee of \$ _____ in the form of a check, bank cashier's check or money order, made payable to the Commissioner of Labor.

Submit a fee of \$ _____ in the form of a bank cashier's check or money order, made payable to the Commissioner of Labor.

As the balance of the fee required

Due to an increase in the size of the project

Payment is required when you send in your notification. If we do not receive your payment within 7 calendar days of this invoice we will issue a Notice of Violation.

If you have already sent your payment, you may disregard this notice.

If there are any questions, please contact the Notification Unit at the above address or by calling (518) 485-9263.

Please return this invoice with your payment.