

**New York City Department of Environmental Protection
Bureau of Environmental Compliance
Asbestos Control Program
59-17 Junction Boulevard, 8th floor
Flushing, New York 11373-5108**

Withdrawal of Consent

I, _____, the undersigned, residing at _____, _____, _____ understand that I may withdraw my consent to the NYCDEP and DMV to use my DMV photo for ID purposes by sending a signed and notarized copy of this form to the NYCDEP by certified mail at the following address:

New York City Department of Environmental Protection
Asbestos Control Program
59-17 Junction Blvd., 8th Floor
Flushing, NY 11373
Attn. Mr. Dennis White

I understand that by withdrawing my consent, my Asbestos certification/license issued by the NYCDEP will be revoked and that I am required to immediately surrender my certification/license to DEP and may not use same for any purpose whatsoever. I further agree to indemnify and save the City of New York and DEP harmless from any claims, actions, damages, or losses, which are caused by or result from my use of the ID after said date of withdrawal of consent.

Signature

Date