

Notification of Contractor Asbestos Related Work or Asbestos Removal Work Form



Please Note: To be completed by the person commissioning the work at **least ten (10)** calendar days before the work commences.

Email completed form to: wayne.cullen@energyq.com.au

1. Type of asbestos related work or asbestos related removal work

A Class Removal Work – Removal that involves friable asbestos	<input type="checkbox"/>
B Class Removal Work – Removal of 10m ² or more of bonded asbestos	<input type="checkbox"/>
Removal of less than 10m ² of bonded asbestos	<input type="checkbox"/>
Work that involves or is likely to involve, the disturbance of Asbestos	<input type="checkbox"/>
Estimated quantity of ACM to be removed (m ² or Kg)	

2. Location of work being preformed

Address where the asbestos work will take place:	
Site Identifier (e g T043 South Twmba) : _____	
No: _____	Street name: _____
Suburb: _____	City/Town: _____
Or GPS Coordinates: _____	
Type of place/plant: (eg. Depot, Sub Station, house, Comms Site, Control Boxes)	
Date the asbestos work is expected to commence:	
Date the asbestos work is expected to be completed:	

3. Contractor Details

Name that appears on the Asbestos Removalist licence or Contractors licence:		
Registered business name of contractor:		
ABN:		
Business contact details	Wk:	Mobile:

4. Supervisor for licensed asbestos removal work

Name of supervisor for the asbestos removal work:		
Supervisors' contact details		
Wk:	Mobile:	

5. Person to conduct inspection and issue clearance certificate

Class A and B Asbestos Removal Work		
Details of OCTEIF person who will be inspecting and issuing the clearance certificate		
Persons Name:		
Contact details	Wk	Mobile:
Work that involves or is likely to involve, the disturbance of Asbestos/ Removal of less than 102 m of bonded asbestos. Persons Name:		

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Contact details	Wk:	Mobile:
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6. **Person commissioning the work being performed**

Person's Name:		
Business Unit:		
Contact details	Wk:	Mobile: