

Notification of Contractor Asbestos Related Work or Asbestos Removal Work Form



Part of Energy Queensland

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 performed

Address where the asbestos work will take place: Site Identifier (eg. 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:

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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 102 m or less of bonded asbestos. Persons Name:		
Contact details	Wk:	Mobile:

6. Person commissioning the work being performed

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