

# Evaluation of Work Affecting Asbestos-Containing Materials

This evaluation covers the following maintenance work:

Location of work (address, building, room number(s), or general description):

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Date(s) of work: \_\_\_\_\_

Description of work: \_\_\_\_\_

Work approval form number: \_\_\_\_\_

Evaluation of work practices employed to minimize disturbance of asbestos:

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Evaluation of work practices employed to contain released fibers and to clean up the work area:

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Evaluation of equipment and procedures used to protect workers:

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Personal air monitoring results: (in-house worker or contract?)

Worker name \_\_\_\_\_

Results: \_\_\_\_\_

Worker name \_\_\_\_\_

Results: \_\_\_\_\_

Handling or storage of ACM waste: \_\_\_\_\_

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

(Asbestos Program Manager)