

APPENDIX C: PROJECT ACM ASSESSMENT & AUTHORIZATION FORM

Work Order Number: _____ Physical Plant Supervisor: _____

Requested date of project completion: _____ Expected start date: _____

Building/Room Number(s) _____ Account # _____

ASSISTANT DIRECTOR DESIGN or SERVICES COORDINATOR or EHOS OFFICER:

NOTE: Check Asbestos Survey Results binder for ACM information

Are asbestos containing materials present in the work area?	YES	NO	UNKNOWN
Does the type or location of work have the potential to disturb ACM or PACM?	YES	NO	UNKNOWN

PHYSICAL PLANT ASSISTANT DIRECTOR, MAINTENANCE/ARCHITECTURAL:

Is ACM/PACM disturbance expected?	YES	NO	UNKNOWN
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If ACM/PACM is present but it is anticipated that it will not be disturbed, state precautionary measures that will be used or reasons that ACM/PACM disturbance is unlikely:

If ACM/PACM disturbance is probable, which materials are likely to be disturbed? (Circle all that apply)

DRYWALL	ALL TYPES OF CEILING TILE	SPRAY ON DECORATIVE MATERIAL
PLASTER	FLOOR TILE AND MASTIC	LINOLEUM
SPRAY-ON FIRE PROOFING	SPRAY-ON ACOUSTICAL	FIRE DOORS
THERMAL SYSTEM INSULATION (TSI)		

OTHER MATERIALS, SPECIFY: _____

Forward form to Environmental Health and Occupational Safety Officer (EHOS) as soon as possible before the project starts. Remember that it could take a week to schedule the inspection and 10 days before asbestos material can be removed.

ENVIRONMENTAL HEALTH AND OCCUPATIONAL SAFETY:

Comments from EHOS:

EHOS Officer Signature

Date