

ASBESTOS SURVEY REQUEST

“Preliminary Scope of Work”

PROJECT # _____ or WORK ORDER # _____

Building _____

Room(s) _____

Estimated age of construction _____



Probable areas of disturbance – Attach drawing with detailed legend (where applicable)

Walls: _____ Sheet rock _____ Plaster _____ Other _____

Floors: _____ Tile _____ Linoleum _____ Carpet _____ Other _____

Ceiling: _____ Acoustic tile _____ Sheetrock _____ Sprayed-on _____ Other _____

Roofing: _____ Asphalt shingles _____ Layered flat _____ Other _____

Pipe: _____ Above ceiling _____ Below floor _____ Behind wall(s) _____ trench _____

Other locations: _____

Preferred date and time for “job walk”: _____

Physical Plant/Buildings and Grounds contact for project: _____

Comments or special Instructions: _____

(Requested by)

(Date and Time)

Submit to Ken Carney, EH&S, M/S 328, FAX 784-4553, Phone 784-6423

EH&S Use Only:

Existing sampling record? _____ *Date* _____ *File Number* _____

Job walk scheduled with _____ *On* _____ *At* _____ *Am/pm*

Based on project description, records search and/or jobwalk observations, it is determined that the proposed work;

Can be completed by UNR O&M crews _____ *, or*

Requires abatement contractor services

Initial _____ *Date* _____ *Time* _____ *,am/pm*