

## **UofM OFD ASBESTOS ABATEMENT APPLICATION/PERMIT**

An ASBESTOS ABATEMENT PERMIT is required to be approved by UofM OFD prior to removal of any asbestos containing materials on campus. *This form is to be filled out in its entirety, by the responsible party supervising the ASBESTOS ABATEMENT, and provided to the UofM Office of Facilities Development for approval, a minimum of 1 week prior to beginning the work.*

Location/Floor/ Room # \_\_\_\_\_

Accredited Asbestos Firm: \_\_\_\_\_ Pho No: \_\_\_\_\_

Firms Accreditation Expiration Date: \_\_\_\_\_

Accredited Asbestos Supervisor: \_\_\_\_\_ Supervisor Pho No: \_\_\_\_\_

Start Date and Time: \_\_\_\_\_ Finish Date and Time: \_\_\_\_\_

***Responsible Party to Circle "yes" or "no" for each item below:***

- |   |     |    |
|---|-----|----|
| • Has Asbestos work area been inspected by all signatories?   | Yes | No |
| • Has HVAC shutdown been approved and scheduled?  | Yes | No |
| • Have the number of HEPA filter type and blowers been approved?  | Yes | No |
| • Are all on-site employees and the company accredited to perform asbestos abatement by the State of Tennessee? | Yes | No |
| • Are workers provided with OSHA approved protective equipment and respirators?                                 | Yes | No |
| • Do abatement personnel have OSHA approved training?   | Yes | No |
| • Is "in-process" air monitoring included?  | Yes | No |
| • Has OFD approved in process test on negative air?   | Yes | No |
| • Will a final air monitoring report be submitted to OFD after completion?                                      | Yes | No |
| • Will contractor post warning and caution signs appropriately?   | Yes | No |
| • Has contractor hazardous waste disposal plan been included?   | Yes | No |
| • Will all hazardous waste be contained?  | Yes | No |
| • Will contractor hazardous waste disposal documents be provided to OFD?  | Yes | No |
| • Will contractor superintendent be always on -site during abatement?   | Yes | No |
| • Will all hazardous waste be containerized?  | Yes | No |
| • Will asbestos contaminated clothing be containerized?   | Yes | No |
| • Have solvent Material Safety Data Sheets (MSDS) been provided?  | Yes | No |
| • Is the work confined the area described in this permit?   | Yes | No |
| • Has the Asbestos Removal Work Plan been submitted and Approved by OFD?  | Yes | No |

I attest that the above precautions have and will be taken \_\_\_\_\_  
Asbestos Supervisor Signature

Approved \_\_\_\_\_ Permit Approval Date: \_\_\_\_\_  
Director of OFD

Date Closed: \_\_\_\_\_ Comments: \_\_\_\_\_

Notes: This permit becomes valid upon Approval signature above.

**THIS PERMIT MUST BE POSTED AT THE SITE OF THE ABATEMENT DURING THE WORK.**

Upon approval, this permit to be cc'd by group email to Asbestos Abatement Group Email