

APPENDIX A
UNC-CH Department of Environment, Health & Safety
1120 Estes Drive Extension
Chapel Hill, NC 27599-1650
962-5507

CONTRACTOR NOTIFICATION FORM

DATE(S) ONSITE: _____

BUILDING: _____

ROOM NUMBER(S): _____

CONTRACTOR: _____

NUMBER OF EMPLOYEES ONSITE: _____

RE: Notification of the Presence of Asbestos-Containing Materials

I, _____, Representative of _____
(Employee Name) (Name of the Company)

acknowledge and understand that _____
(Location of Work)

may potentially contain asbestos debris.

I acknowledge that I have been advised of the dangers associated with exposure to airborne asbestos fibers including, but not limited to, the fact that asbestos can cause Asbestosis, and is a known carcinogen and can cause various types of cancer.

I agree faithfully to take all precautions to protect my employees, and to conform to, all applicable requirements of Federal, state and local regulations.

SIGNATURE: _____

UNC REPRESENTATIVE: _____

DATE: _____

APPENDIX B
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BUILDING OCCUPANT NOTIFICATION
Notification Date: _____

Building Name: _____

Site Location: _____

Scheduled Remediation Dates: _____

Environmental Remediation Firm: _____

Environmental Consultant: _____

Additional Comments: _____

Should you have any questions, please contact _____ at

_____ or EHS representative _____ at

_____.

APPENDIX C
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Asbestos Operation & Maintenance (O&M) Activity Form

Job/Order Number: _____

Date of Work Operation: _____

Building Name: _____

Description of Work Operation: (include type and quantity of ACM removed).

Names of Employees Involved in Work Operation

PID Numbers

<u>Names of Employees Involved in Work Operation</u>	<u>PID Numbers</u>
_____	_____
_____	7
_____	_____
_____	_____
_____	_____

Signature of Authorized Representative of Employer Who Has assigned Competent Person to this Job.

Signature of Competent Person

University of North Carolina at Chapel Hill

Name of Employer

Chapel Hill, NC

Address

Date