



Asbestos Removal Control Plan (AR2)

(in accordance with Code of Practice for the Safe Removal of Asbestos
NOHSC:2002(2005))

Prepared by:.....Date:.....

Asbestos Licence Holder:.....Licence Number:.....

For ACM removal at (address):.....

On behalf of (client):.....

IDENTIFICATION

Type: Flat Asbestos Cement Sheet Corrugated Asbestos Cement Sheet
Formed Asbestos Cement Products Lagging Millboard
Textile Loose fill Sprayed Insulation

Quantity of ACM to be removed:..... (Square metres)

Condition of ACM to be removed (tick appropriate boxes)

Good Condition Painted Unsealed Slightly Weathered Significant
Weathering

Minor Breakages Extensive Breakages Fire Damaged

Additional Details:.....
.....

Location: Indoors Outdoors but protected Outdoors and exposed to
weather Enclosed in ducts Below ground in trenches

Details:.....
.....

PREPARATION

CONSULTATION (ref: part 7.1)

Will be undertaken with the following persons at any business and workplace where ACM
removal takes place

The Client The occupying employer Their employees

An employee safety committee or ESR The principal contractor

Other contractors on site Neighbouring businesses Other Authority

Details:
.....
.....
.....

Consultation continued:

Will be undertaken with the following neighbouring property owners, including domestic properties prior to any ACM removal

Property Addresses:.....
.....
.....
.....
.....

CONTROL:

Person supervising asbestos removal is:.....
Their direct contact number is:.....

TIMING OF REMOVAL WORK:

Planned start date:..... Intended completion date:.....

EMERGENCY PLANNING (ref: part 8.2)

First aid officer on site is:.....

Emergency contact details are maintained on site: Yes No

All site workers are trained in emergency response: Yes No

The following emergency response equipment is held on site (provide details)

.....
.....

The following have been identified as potential emergency situations (provide details)

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.....
.....

BOUNDARIES & BARRICADES (ref: parts 9.1 & 9.2)

The Asbestos work area will be (define the area involved).....

.....
It will be defined by the following signage (type and locations) and barricade (type & location):

.....
.....

The Asbestos removal site will be (define the area involved).....

.....
It will be defined by the following signage (type and locations) and barricade (type & location):

.....
.....

ELECTRICAL SAFETY (ref: part 9.3)

The following electrical safety issues have been identified during the planning for ACM removal:

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.....

The following actions will be initiated to control those electrical safety issues:.....

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.....
.....

PERSONAL PROTECTIVE EQUIPMENT (ref: part 9.7)

The following PPE is required and will be supplied and worn at all times throughout the ACM removal process

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.....
.....
.....
.....

All workers wearing a negative pressure respirator will be clean shaven Yes No

If not the following respiratory protection will be provided:

AIR MONITORING PROGRAM (ref: part 9.8)

If no air monitoring required please provide reasons below:

.....

The following air monitoring will be conducted:

Background monitoring before removal Number & frequency of testing:.....

Control monitoring during removal Number & frequency of testing:.....

Exposure monitoring during removal Number & frequency of testing:.....

Clearance monitoring following removal Number & frequency of testing:.....

Competent person engaged to plan and conduct air monitoring:.....

Contact details of the competent person:.....

ON SITE MANAGEMENT OF REMOVED ACM (ref: part 9.10)

Removed ACM will be held on site for more than one working day: Yes No

If yes, detail how the ACM will be stored including the type of storage containers to be used and the dedicated location for stored ACM within the removal area:.....

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.....
.....

REMOVAL METHOD (ref: part 9.5)

Detail the planned methodology for removing the ACM, this must accord with part 9.5 of the CoP:

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.....

(Provide additional pages as necessary)

Smoke testing of the enclosure will be conducted prior to use and at the following intervals to confirm the integrity of the enclosure, records of these tests will be developed and maintained:

Frequency of testing:.....
Person responsible for conduct & recording of testing:.....

DECONTAMINATION UNITS (ref: part 10.2)

The following details outline the decontamination unit that will be interconnected with the enclosure:

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OTHER CONTROL MEASURES:

the following additional controls will be enacted to ensure asbestos containment within the designated asbestos work area:.....

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DECONTAMINATION

ACM REMOVAL AREA (ref: part 9.9.1)

The following decontamination methods will be applied to the removal area:.....

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.....
.....
.....

EQUIPMENT, TOOLS & PLANT (ref: part 9.9.2)

The following decontamination methods will be applied to the tools, equipment and plant:

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.....
.....
.....

SOIL (ref: part 9.9.3)

The following decontamination methods will be applied to the soil in the removal area:

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PERSONAL DECONTAMINATION (ref: part 9.9.4)

The following personal decontamination procedures will be applied to all workers engaged in the removal work:.....

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.....

RECYCLING (ref: part 9.12)

Is any recycling planned for materials that previously had ACM attached: Yes No

Detail the procedures for ensuring all recyclable materials will be decontaminated prior to reuse or disposal:

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.....
.....

DISPOSAL OF WASTE

PROPOSED DISPOSAL SITE IS:.....

COMPANY ENGAGED TO TRANSPORT WASTE:.....

HAZARDOUS WASTE CARTAGE LICENCE NO:.....

Personal information we collect from you will be used by Workplace Standards Tasmania for that purpose and may be used for other purposes permitted by legislation and policies administered by Workplace Standards Tasmania. Your personal information may be disclosed to contractors and agents of Workplace Standards Tasmania; law enforcement agencies, courts and other public sector bodies or organisations authorised to collect it. This information will be managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by you on request to this Department. You may be charged a fee for this service.

UPON COMPLETION SEND COPY OF PLAN TO:

- 1. WORKPLACE STANDARDS TASMANIA
PO Box 56
ROSNY PARK TAS 7018

- 2. CLIENT

Web: www.wst.tas.gov.au
Email: wstinfo@justice.tas.gov.au