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| **Permit pre-work approvals must be completed prior to start of work.** |
| **Name:** | **Company:** |
| **Supervisor / Mosaic Liaison:** | **Contact #:** | **Date:** |
| **Site:** | **Area/Location:** | **Asset# / Equipment:** |
| **Work Order/PO#:** | **HMIS Database Location Reference:** | **Location:** [ ]  Indoors **[ ]** Outdoors  |
| **Work to be performed:** |
| **Asbestos Process: [ ]  Low Risk [ ]  Moderate Risk [ ]  High Risk** |
| **Notification to Division:** | [ ]  Required (include documentation) [ ]  Not Required |
| **Work Activity:** | [ ]  Abatement [ ]  Repair [ ]  Sample Collection [ ]  Cleaning/disposal |
| **Material:** | **[ ]** Trafford Tile [ ]  Transite Board [ ]  Fireproofing [ ]  Floor Tile [ ]  Parging Cement[ ]  Pipe Insulation (specify) . [ ]  Vermiculite [ ]  Compounds/mud/filler[ ]  Other . |
| **Characteristics:** | [ ]  Friable [ ]  Non-Friable[ ]  Good condition [ ]  Damaged [ ]  Debris  |
| **Specific Area and Approximate Amount:** | [ ]  Specific removal location: . [ ]  Approx amount to be removed: . [ ]  Sample only |
| **Training:** | [ ]  Workers have completed applicable training. |
| **Area Isolation:** | [ ]  Asbestos Barricade Tape/Tag [ ]  Hard barricading [ ] Signage [ ] Hoarding |
| **Air Monitoring:** | [ ]  Required [ ]  Not Required |
| **Abatement Method:** | [ ]  Removal [ ]  Encapsulation [ ]  Enclosure [ ]  Wet Method [ ]  Hoarding [ ]  Sealant (penetrant) [ ]  Plywood/drywall [ ]  Dry Method[ ]  Glove Bag [ ]  Sealant (bridging) [ ]  Wrap/jacketing[ ] Other . |
| **Additional PPE:** | [ ]  Respirator (specify) .[ ]  Disposable Coveralls [ ]  Disposable Gloves [ ]  Other: .  |
| **Equipment Used:** | [ ]  Hoarding materials [ ]  6 mill Poly (drop sheets/barriers/bags) [ ] Vacuum (HEPA) [ ]  Hand Tools [ ]  Power Tools [ ]  Hand Pump (wetting/sealant) [ ]  Other: .  |
| **Disposal:** | [ ]  Double Bagged [ ]  Double Wrapped [ ]  Asbestos disposal location identified  |
| **Special or Emergency Instructions:** |
| **Permit is valid for the duration of the job. If the work activity or conditions change, this permit must be closed and a new permit must be completed.** Contact your Supervisor, Mosaic Liaison, or the Mosaic Safety Department. |
| **Pre-work authorization:** |
| **Employee(s) / Contractor(s)** |  |  |  |
| **Mosaic / Contract Supervisor** |  | **Date:** |
| **Mosaic Liaison (if applicable)** |  | **Date:** |
| **Mosaic EHS Department** |  | **Date:** |
| **Post-work inspection and permit close out:** |
| **Housekeeping:** | [ ]  Area Vacuumed (HEPA) [ ]  Area washed down [ ]  Tools and Equipment Cleaned[ ]  Waste double bagged / double wrapped [ ]  Disposal in Asbestos Bin |
| **Amount Removed:** | [ ]  Sq. Ft. .[ ]  Units (eg. elbows) . | [ ]  Nothing removed[ ]  Sample Only |
| **Air Monitoring Results:** |  | [ ]  Not Required |
| **Mosaic Final Permit Review** |  | **Date:**  |

Submit completed Asbestos Work Permits to Site EHS. A copy will be sent to Pinchin for HMIS update.