

**COMPREHENSIVE
ASBESTOS INSPECTION
REPORT**

PROJECT

THIS BUILDING

THE ASBESTOS INSTITUTE



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The Asbestos Institute, 8102 North 23rd Avenue, Suite A, Phoenix, Arizona 85021,
(602)864-6564, (602)864-6670 (FAX), www.taiinfo.com.

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INTRODUCTION

The purpose of this book is to simplify and give a standard regulatory format for conducting building inspections for asbestos containing materials as set forth in the Asbestos Hazard Emergency Response Act (40 CFR 763.85(a)).

If this format is followed and all of the forms are filled out, this book (with the lab reports attached) will stand alone fulfilling all of the requirements of an AHERA inspection report as itemized at 40 CFR 763.93(e)(3). No other report will need to be prepared or generated.

To understand the sequence of events and application of this information, the person using this book must be accredited as an AHERA Building Inspector under the EPA's Model Accreditation Plan at 40 CFR 763, Subpart E, Appendix C.

At a site with multiple buildings to be inspected, one book must be used for each single building inspected. Even though numerous buildings at a site may have been constructed at the same time, by the same contractor, using the same building materials, each building must be inspected separately and reported on separately.

The regulatory application of an AHERA building inspection is to prove what suspect building materials are NOT asbestos containing, and therefore may be treated as normal construction material or waste. All others must be treated as asbestos, whether sampled or not. Also, if suspect materials are not identified during this inspection, and are later discovered, they must be treated as asbestos until proven otherwise by sampling and analysis.

CAUTIONARY NOTE

The ONLY exclusions from suspect materials are those given by EPA at 40 CFR 763.86 (b)(4) and question 38 in the "100 Questions" document. All other materials must be treated as asbestos unless proven clean by this AHERA procedure.

A comprehensive building inspection will include materials located on the exterior of the building as well as the interior. The purpose of an inspection for major remodel or demolition is to locate all ACBM, whether inside or outside of the building. Only then may potential exposure and liability be avoided.

STANDARD OPERATING PROCEDURES AND SEQUENCE OF EVENTS

This inspection guide and report follows a logical progression of the AHERA concept for building inspections.

First, all homogeneous areas of suspect materials are listed in numerical order during a systematic building walk-through. All functional spaces, or areas of specific use in the building must be inspected. At that same time, notes on friability, material type, and location of suspect material by functional space should be completed.

Next, each homogeneous area should be quantified by square or linear footage. With that information, sampling schemes may be designated which meet regulatory criteria as to the number of samples and manner of determining sample locations.

Samples should then be collected, noting exact location by both written log description and indication on drawings or blueprints.

Assessment information is gathered representing the condition of the suspect material and the occupancy and use of each area containing the suspect material. This information, and the results of the laboratory analysis will be used to complete a written assessment for each FRIABLE or TSI ACBM, whether sampled or assumed. No non-friable or non-ACBM should be included in this formal written assessment procedure. The written assessment will assign a standard AHERA condition category to each area of friable or TSI ACBM in the building, and justify or explain why the material was so categorized. A photo log may be of important use in clearly defining assessment situations.

For ease of building owner/operator use, a clear list of ACBM should be presented, as well as a clear indication of its location in the building. This should be accomplished by both a form list and the use of building drawings or blueprints.

Any emergency or critical situations of exposure or building contamination should also be clearly described and located.

Supplements to this completed inspection book may be:

1. An area map
2. A site map
3. Building blueprints or drawings
4. A photo log
5. The laboratory report

This completed inspection report may then be used for any regulatory purpose under AHERA, NESHAP or OSHA; to develop an asbestos Operations and Maintenance Plan; or as a component of an environmental site assessment for real estate transfer or mortgage.

The Asbestos Program Manager using this completed inspection report need only initially reference the Executive Summary section to find a list of all asbestos containing materials in the building, as well as a list of critical situations.

The Building Inspector conducting the survey will need to complete the entire inspection report in order to obtain the information to fill out the Executive Summary pages. The Inspection Report and Field Data section will then serve to document the accuracy and process used to obtain the information in the Executive Summary.

**SECTION 1
EXECUTIVE
SUMMARY**

Date: _____

Building Owner: _____

Contact Person: _____

Business Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

Site Name: _____

Building Description: _____

Address: _____

CERTIFIED BUILDING INSPECTOR(S):

Company: _____

Address: _____

Telephone: _____ Fax: _____

Print Inspectors Name: _____

Accreditation Agency: _____ Accreditation Number: _____

Signature: _____

Print Inspectors Name: _____

Accreditation Agency: _____ Accreditation Number: _____

Signature: _____

Print Inspectors Name: _____

Accreditation Agency: _____ Accreditation Number: _____

Signature: _____

CRITICAL SITUATIONS

1. Homogeneous Area: _____
Functional Space: _____
Description of Situation: _____

2. Homogeneous Area: _____
Functional Space: _____
Description of Situation: _____

3. Homogeneous Area: _____
Functional Space: _____
Description of Situation: _____

4. Homogeneous Area: _____
Functional Space: _____
Description of Situation: _____

5. Homogeneous Area: _____
Functional Space: _____
Description of Situation: _____

6. Homogeneous Area: _____
Functional Space: _____
Description of Situation: _____

**SECTION 2
SUMMARY OF INSPECTION
PROCEDURES**

PRE-INSPECTION PROCEDURES

Agreement on scope of work

Obtain construction specifications manual

Obtain construction blueprints or as-builts

Copy applicable pages from prints or specs

Interview building manager

Schedule date of inspection

Arrange for escort and/or pass keys

Arrange lift needs

Adequately stock sample kit

Notify security agency of schedule

INSPECTION PROCEDURES

Inspect each building individually

Inspect every area in the building

List all suspect ACBM

Touch all suspect ACBM to determine friability

Document friability by homogeneous area

Document type of material as TSI, Surfacing or Miscellaneous

Document location of all homogeneous areas of suspect ACBM

Quantify all homogeneous areas of suspect ACBM

Document sampling scheme for each homogeneous area to be sampled

Document all homogeneous areas to be assumed ACBM

Collect bulk samples

Document exact location of each sample

Assess each homogeneous area and/or functional space

Note any emergency situations

Complete chain of custody documents for bulk samples

Send bulk samples to NVLAP accredited laboratory

Clearly list all ACBM

Complete written assessment of all friable ACBM

Attach blueprints or diagrams

Attach Lab Report

**SECTION 3
INSPECTION REPORT
FIELD DATA**

LOCATION BY FUNCTIONAL SPACE

Project Name: _____

Address: _____

Building: _____

Description of Functional Spaces

A	
B	
C	
D	
E	
F	
G	
H	
I	
J	

Functional Space Letter	Homogeneous Areas Found in Given Functional Spaces						
	Floor	Base	Wall	Ceiling	Fireproof	TSI	Other
A							
B							
C							
D							
E							
F							
G							
H							
I							
J							

LOCATION BY FUNCTIONAL SPACE

Project Name: _____
 Address: _____
 Building: _____

Description of Functional Spaces

K	
L	
M	
N	
O	
P	
Q	
R	
S	

Functional Space Letter	Homogeneous Areas Found in Given Functional Spaces						
	Floor	Base	Wall	Ceiling	Fireproof	TSI	Other
K							
L							
M							
N							
O							
P							
Q							
R							
S							

LOCATION BY FUNCTIONAL SPACE

Project Name: _____

Address: _____

Building: _____

Description of Functional Spaces

T	
U	
V	
W	
X	
Y	
Z	

Functional Space Letter	Homogeneous Areas Found in Given Functional Spaces						
	Floor	Base	Wall	Ceiling	Fireproof	TSI	Other
T							
U							
V							
W							
X							
Y							
Z							

RANDOM NUMBER DIAGRAMS

Homogeneous
Area #

Sample Location		
9	8	1
2	7	6
5	3	4

1 (19)

Homogeneous
Area#

Sample Locations		
5	8	1
4	3	6
2	7	9

7(25)

Homogeneous
Area #

Sample Locations		
8	5	2
3	6	9
7	1	4

13(31)

2(20)

8	7	1
3	9	5
4	2	6

8(26)

5	7	1
6	3	4
2	8	9

14(32)

4	1	6
3	9	7
8	5	2

3(21)

4	1	7
2	9	6
8	5	3

9(27)

3	6	4
9	2	7
5	8	1

15(33)

3	5	6
9	2	8
7	4	1

4(22)

6	1	8
5	9	3
2	7	4

10(28)

5	7	3
8	1	6
2	9	4

16(34)

4	8	3
2	5	9
7	1	6

5(23)

6	4	3
1	5	8
9	2	7

11(29)

5	1	6
3	4	9
7	8	2

17(35)

8	2	7
4	5	3
1	9	6

6(24)

7	4	3
6	1	5
2	9	8

12(30)

7	1	9
2	4	5
6	8	3

18(36)

12	5	9
6	1	8
4	7	3

MANNER OF SAMPLING DOCUMENTATION

Homogeneous Area Description: _____ #: _____
Functional Space or Room: _____

Floor Plan and Sample Locations:



Date: _____
Inspector: _____
Signature: _____

MANNER OF SAMPLING DOCUMENTATION

Homogeneous Area Description: _____ #: _____
Functional Space or Room: _____

Floor Plan and Sample Locations:

Date: _____
Inspector: _____
Signature: _____

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MANNER OF SAMPLING DOCUMENTATION

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Functional Space or Room: _____

Floor Plan and Sample Locations:



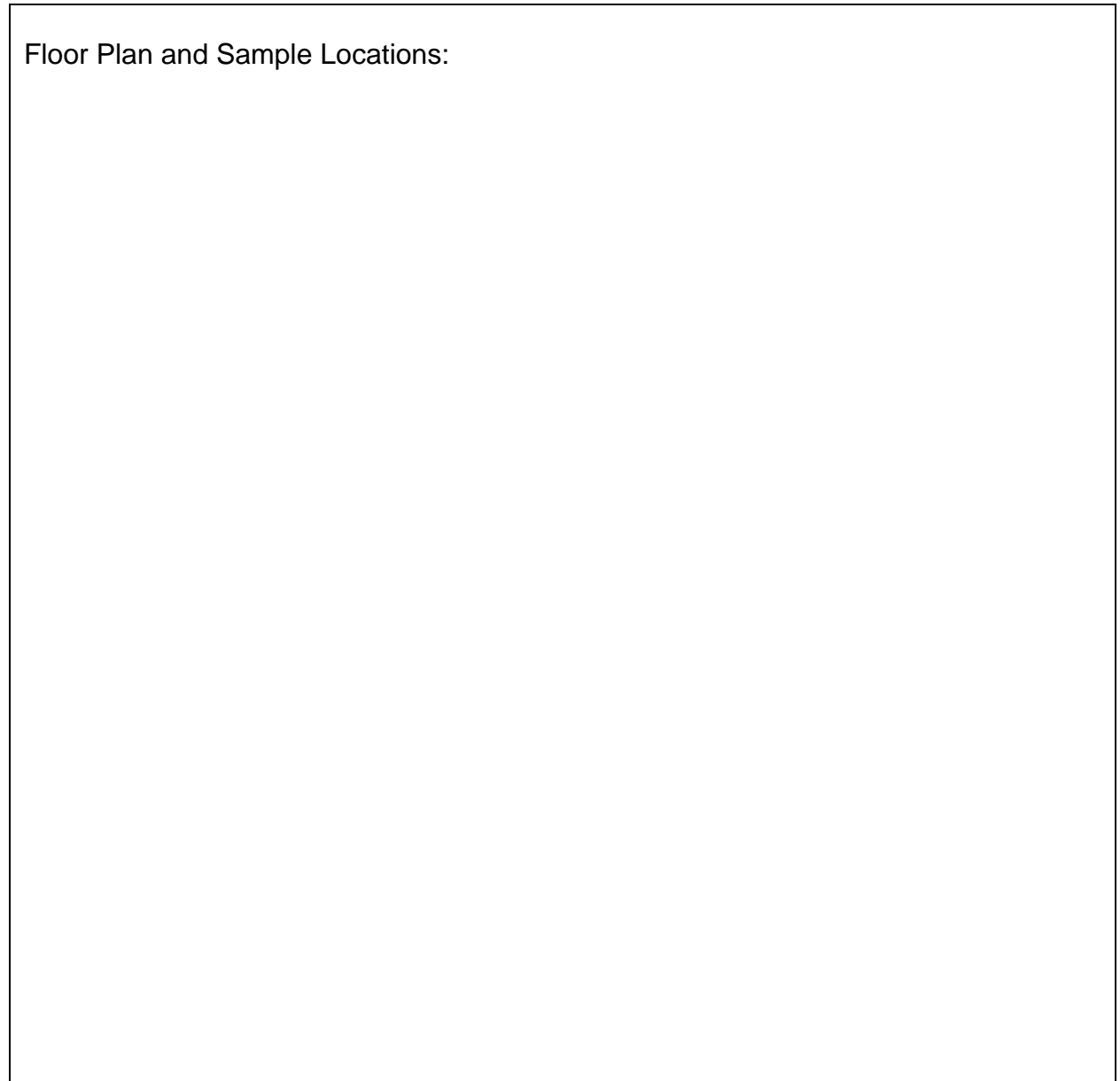
Date: _____
Inspector: _____
Signature: _____

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Functional Space or Room: _____

Floor Plan and Sample Locations:



Date: _____

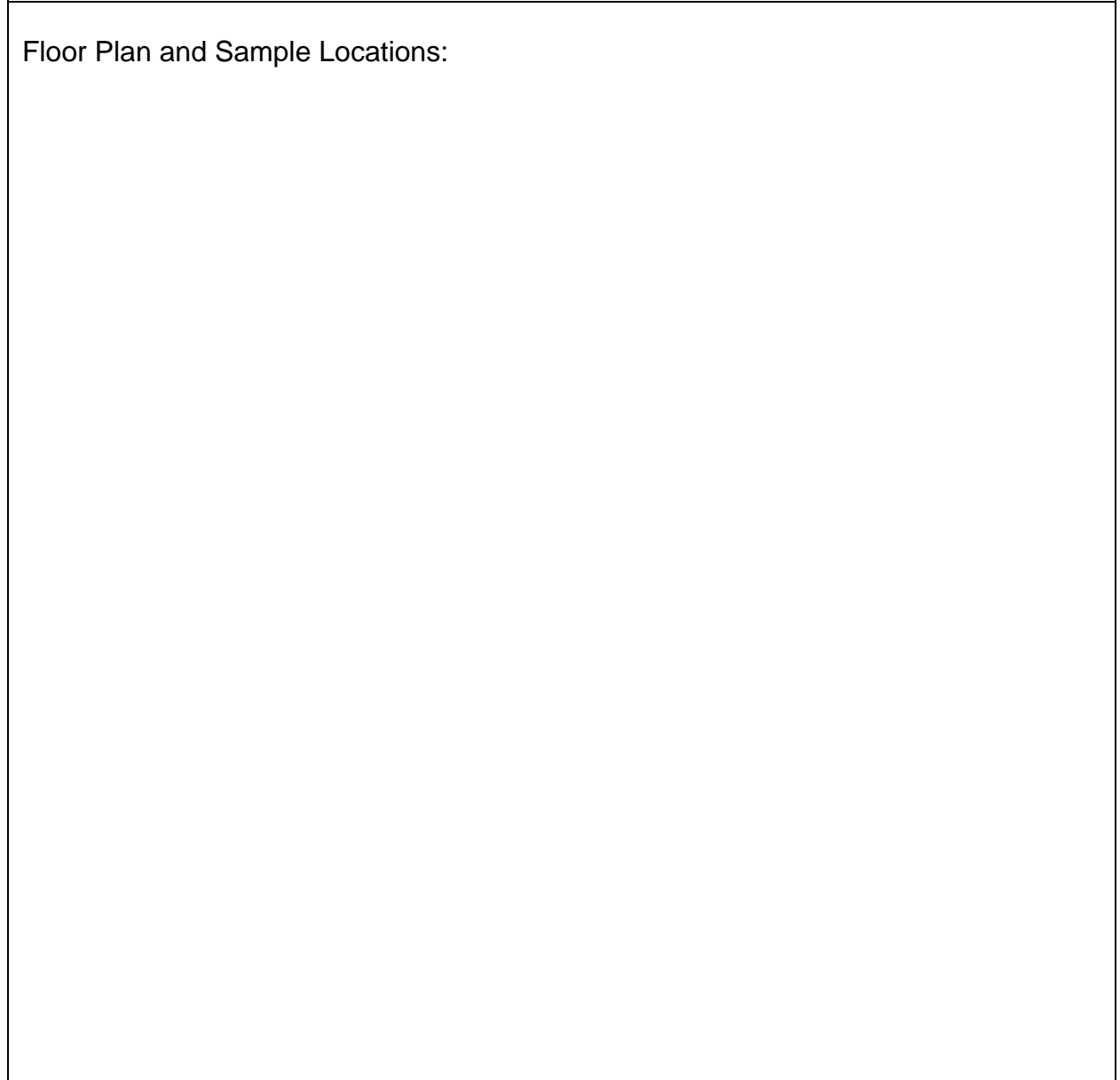
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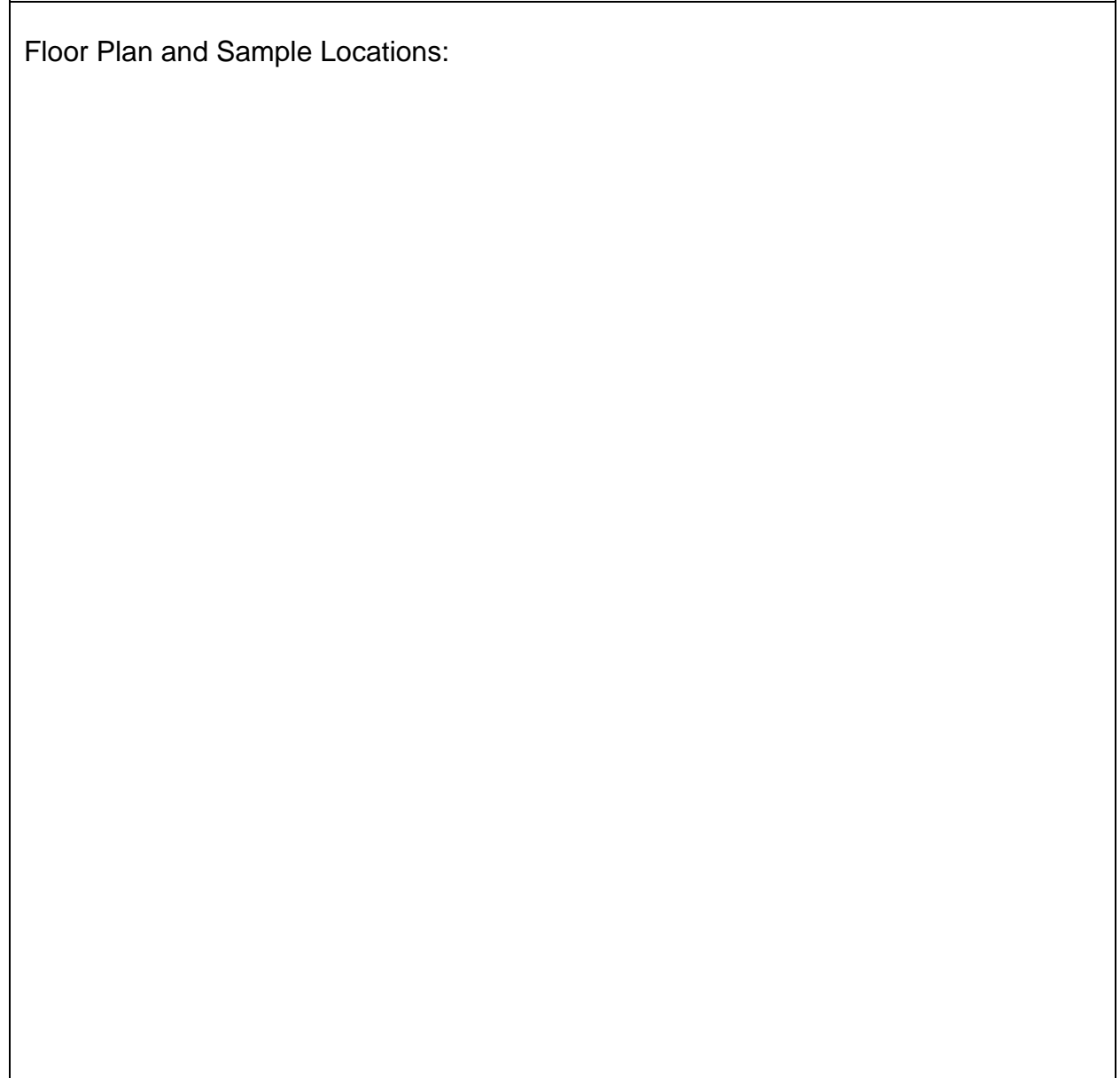


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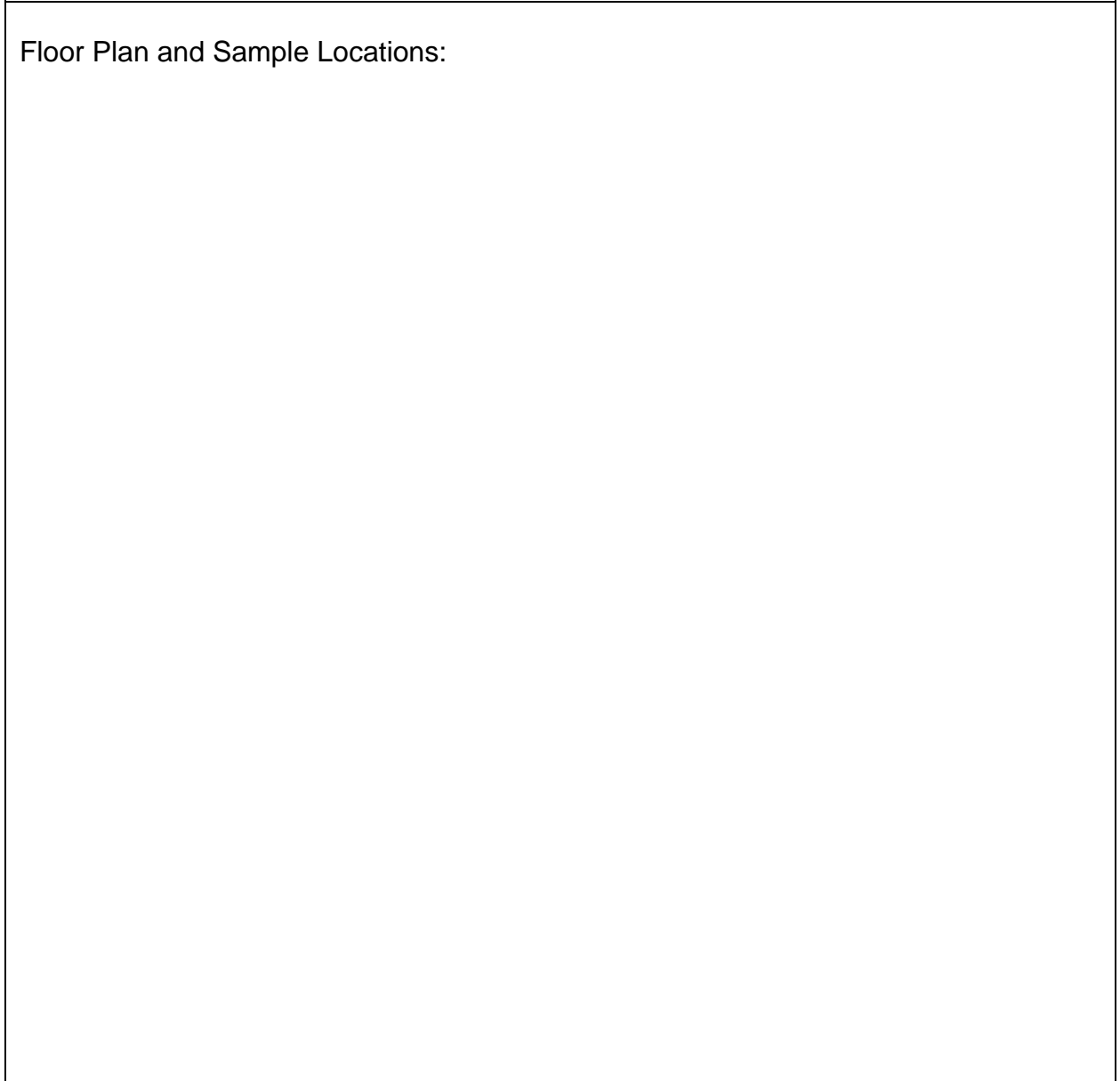
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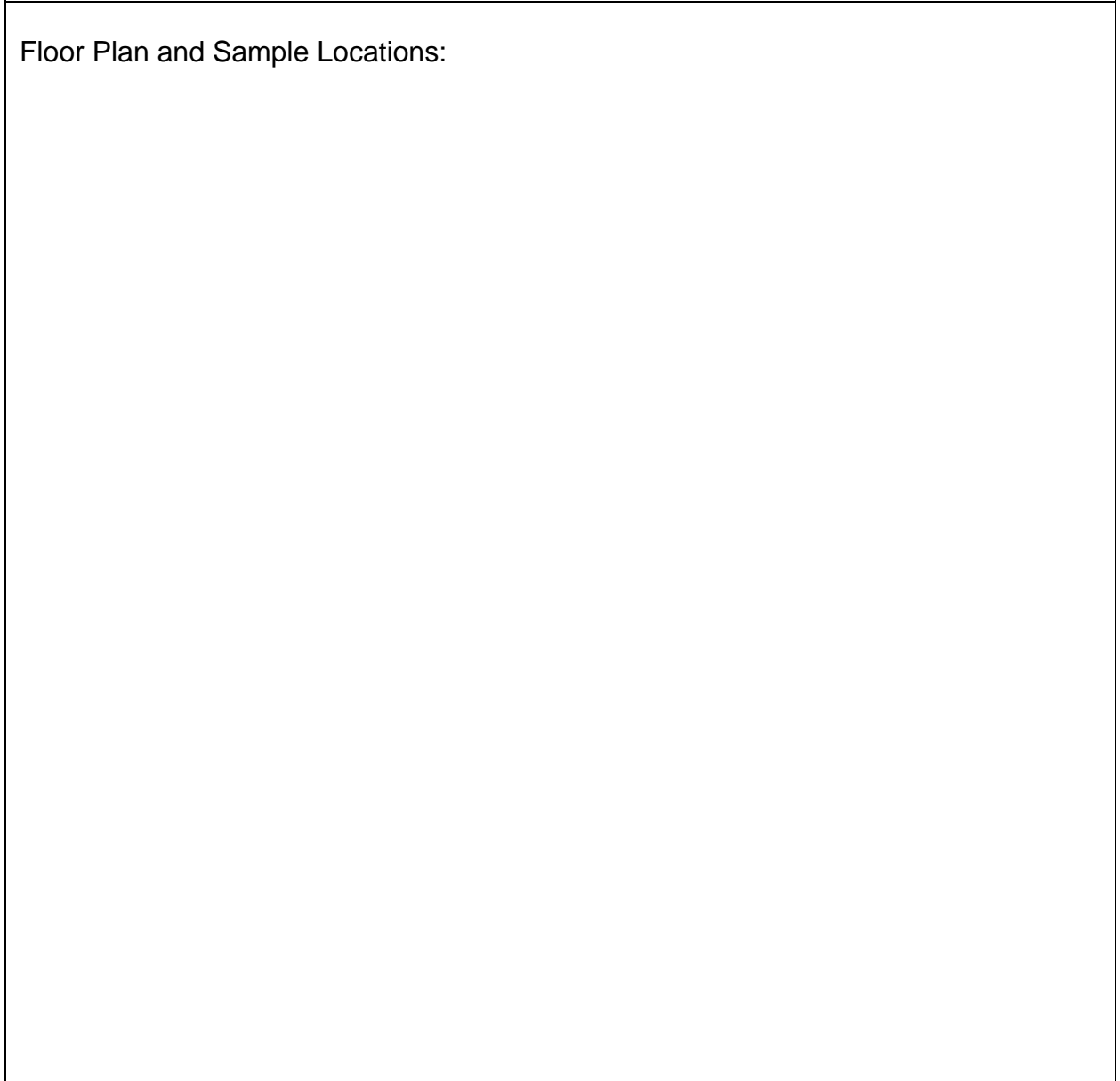
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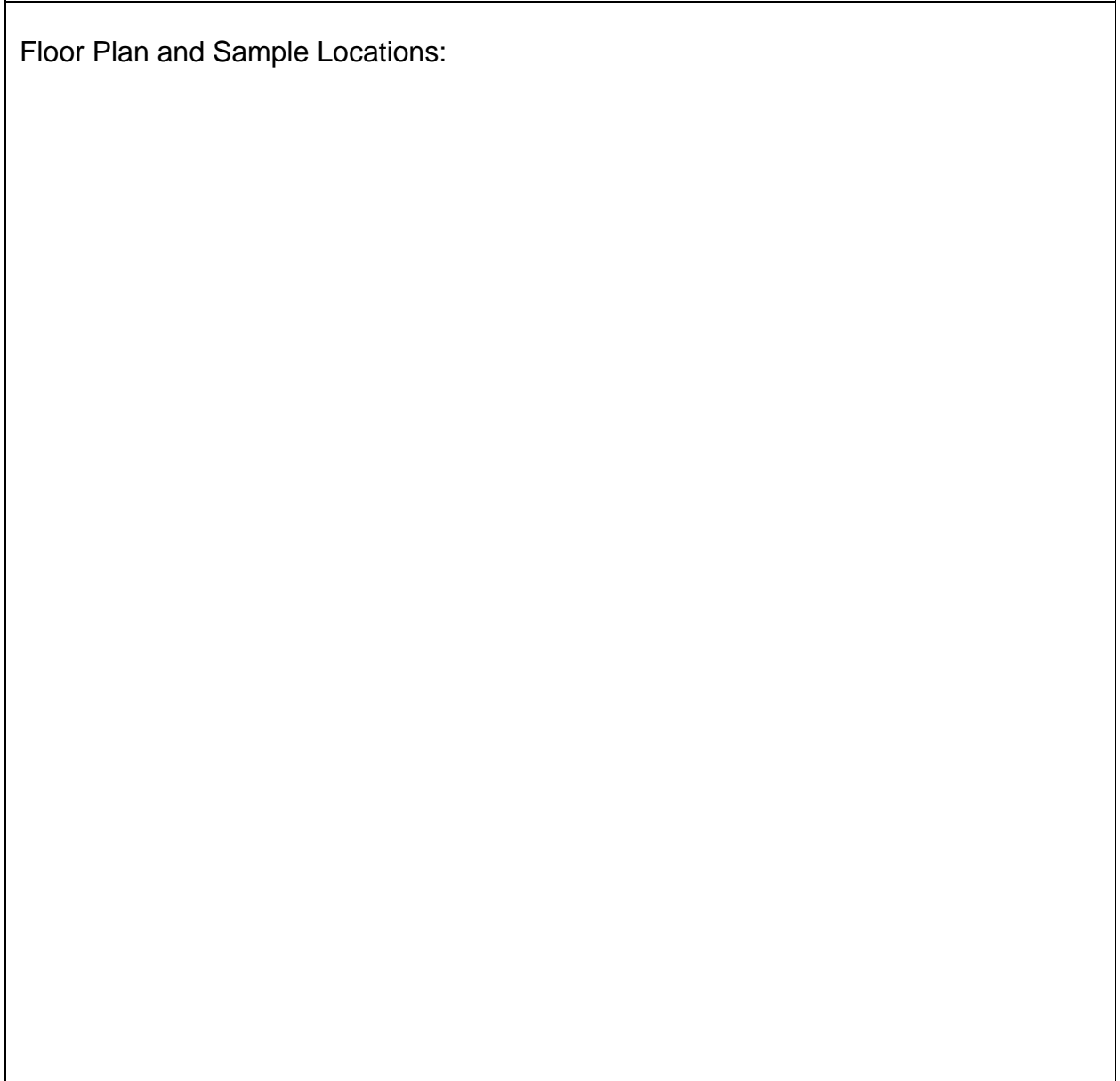
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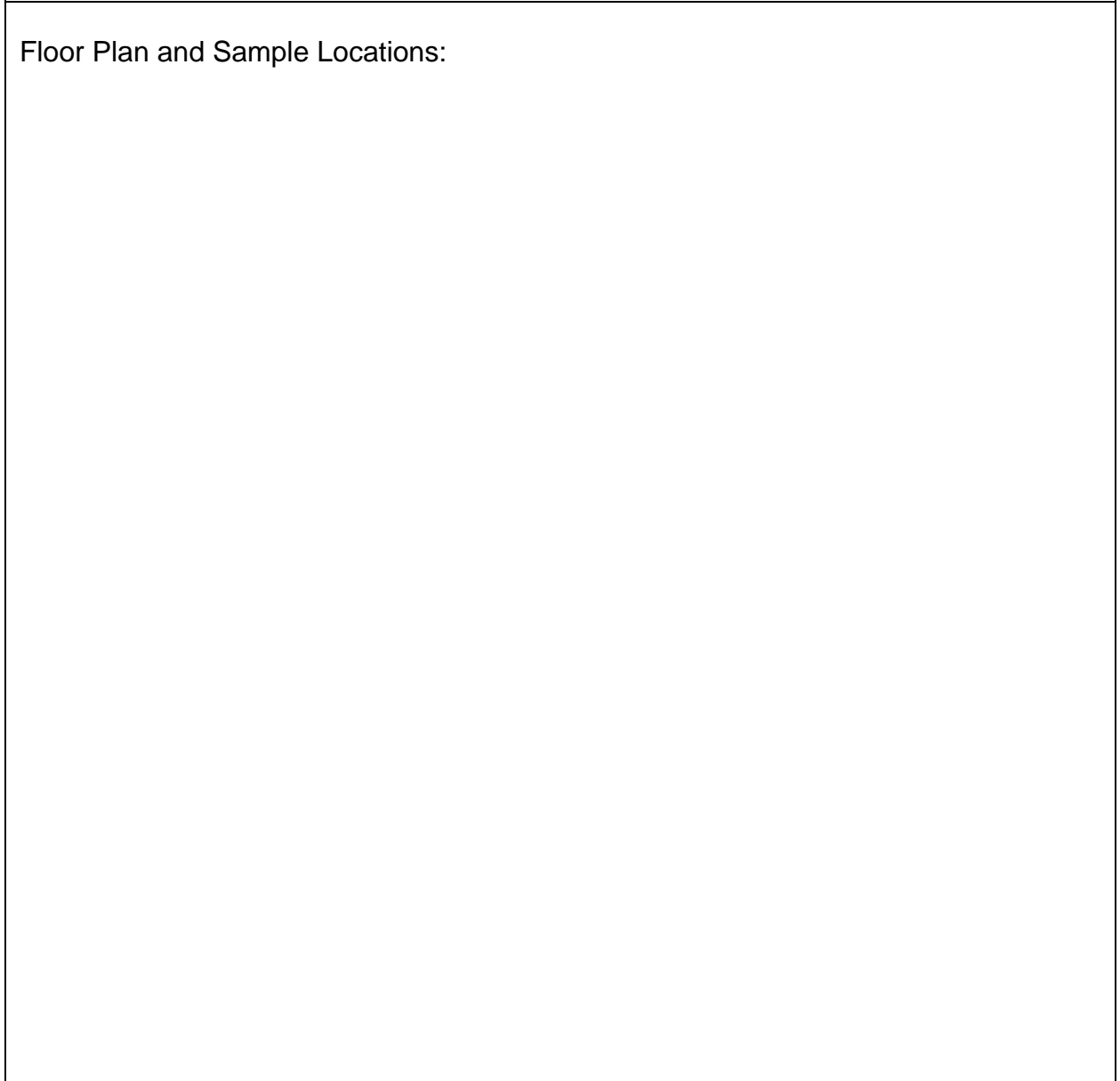
Signature: _____

MANNER OF SAMPLING DOCUMENTATION

Homogeneous Area Description: _____ #: _____

Functional Space or Room: _____

Floor Plan and Sample Locations:



Date: _____

Inspector: _____

Signature: _____

BULK SAMPLE LOG

Homogeneous Area Description: _____

Homogeneous Area Number: _____ Sq. Ft. _____ Ln. Ft. _____

Date of Sample collection: _____ Manner of Sampling: _____

Circle one: Surfacing TSI Misc

Circle one: Friable Non-Friable

NESHAP: Circle one: RACM Category I Category II

OSHA Removal: Circle one: Class I Work Class II Work

Sample Number	Exact Location

Printed Name: _____

Signed Name: _____

State of Accreditation: _____

Accreditation Number: _____

BULK SAMPLE LOG

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Homogeneous Area Number: _____ Sq. Ft. _____ Ln. Ft. _____

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OSHA Removal: Circle one: Class I Work Class II Work

Sample Number	Exact Location

Printed Name: _____

Signed Name: _____

State of Accreditation: _____

Accreditation Number: _____

CHAIN OF CUSTODY

Client/Project #: _____ Job #: _____ Purchase Order #: _____

Send lab report to: _____ Lab Destination: _____
 _____ Date Shipped: _____

Lab Contact: _____

Attention: _____ Lab Phone Number: _____

Invoice to: _____ Date Report Required: _____

_____ Client Contact: _____

_____ Client Phone Number: _____

Sampling Inspector: Print Name: _____ Signature: _____

Sample ID	Sample Description	Sample ID	Sample Description

Relinquished By	Date/Time	to	Received By	Date/Time

Shipped via: _____

Lab Comments: _____

CHAIN OF CUSTODY

Client/Project #: _____ Job #: _____ Purchase Order #: _____

Send lab report to: _____ Lab Destination: _____

_____ Date Shipped: _____

_____ Lab Contact: _____

Attention: _____ Lab Phone Number: _____

Invoice to: _____ Date Report Required: _____

_____ Client Contact: _____

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Sampling Inspector: Print Name: _____ Signature: _____

Sample ID	Sample Description	Sample ID	Sample Description

Relinquished By	Date/Time	to	Received By	Date/Time

Shipped via: _____

Lab Comments: _____

**WRITTEN ASSESSMENT OF FRIABLE, DAMAGED NON-FRIABLE
& TSI ACBM**

Date: _____
Owner: _____
Site: _____
Building: _____

Homogeneous Area: _____ #: _____

Homogeneous Area or Functional Space specific (circle one)
Functional Space: _____

Quantity of material in Homogeneous Area: _____ sf or lf (circle one)

Circle one on each line:

Sampled or assumed to be ACM ?

Type of material: Surfacing Thermal System Insulation Miscellaneous

Friable Homogeneous Area Damaged Non-friable Assessment TSI

Condition of ACBM: Significantly Damaged Damaged Good

Damage type: Deterioration Water Physical contact Other: _____

Extent of damage: sf lf _____ Percent of damage: _____

Pattern of damage: Evenly distributed Localized

Is the material accessible? Yes no Spread by HVAC? Yes no

<u>Potential For Disturbance</u>	Potential for Contact:	High	Moderate	Low
	Potential for Vibration:	High	Moderate	Low
	Potential for Air Erosion:	High	Moderate	Low

Average use of space: _____ People/Hr. _____ Hrs/Day _____ Days/Year
Main occupant population: Students Maintenance Administration Other _____

AHERA Classification: _____ #: _____

Preventive measures to keep Undamaged from becoming Significantly Damaged:

Inspector Name _____ Signature _____
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