

Environmental Health & Life Safety
ASBESTOS CONTAINING MATERIAL (ACM) CHECKLIST

Complete this form for all renovation or demolition projects that involve the potential disturbance of ACM. The form must be sent to the EHLS Asbestos & Safety Coordinator prior to the start of the project via email to dpkhambhati@uh.edu.

Building Number: _____ Building Name: _____

Project Manager: _____ / _____ FP&C _____ FM _____ Other _____

Will any ACM be disturbed? Describe the nature and quantity of ACM being abated.

Probable Start Date: _____

Probable End Date: _____

1 - Identify ACM Concerns: Check most recent ACM survey on FAMIS.

The most recent ACM surveys show the proposed work area to contain ACM? (Pick one)

No _____
(Stop Here)

Unsure _____ (proceed to 2)

Yes _____ (proceed to 3)

I have checked the most recent survey and ACM is not in the proposed work area. Sign form and proceed with project.

Project Manager _____

Date _____

2 – There may be (or may not be) ACM: two options

Option 1 I have found documentation that the proposed work area **does not contain ACM**, forwarded this information to EHS, and the most recent survey is being updated to show no ACM in the area. Sign form and proceed with project.

Project Manager _____

Date _____

Option 2 I have had the area tested and the results **show no ACM**, forwarded this information to EHS, and the most recent survey is being updated to show no ACM in the area. Sign form and proceed with project.

Project Manager _____

Date _____

3 - Formal Abatement Project

I am proceeding with ACM abatement project and will send EHS project documentation.

Project Manager _____

Date: _____