Department of Justice

WorkSafe Tasmania

PO Box 56 ROSNY PARK TAS 7018

*Phone:* 1300 366 322  (Inside  Tasmania)

03 6166 4600 (Outside  Tasmania)

*Fax:*  03  6173 0206

*Email:*  wstinfo@justice.tas.gov.au*Web*:  www.worksafe.tas.gov.au

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| --- | --- | --- | --- |
| **2. Details of** supervisor **of the removal work** | | | |
| Name  of  supervisor  for  the  asbestos  removal  work: | | | |
| Contact  details | Office phone: | Mobile: | Email: |

|  |  |  |  |
| --- | --- | --- | --- |
| 3. Details of person to conduct inspection and issue clearance certificate | | | |
| Name  of  the  licensed asbestor assessor  or competent person\* who  will  be  inspecting  and  issuing  the  clearance  certificate:  \* For Class B removal clearances the person does not have to be a licensed asbestos assessor but you must also specify their training and experience as per the requirements in regulation 5 - interpretation of “Competent Person” paragraph (f). | | | |
| Contact  details | Office phone: | Mobile: | Email: |

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| 4. Client or person for whom the work is being performed | | | | | |
| Client  name: | | | | | |
| Contact  details | Office phone: | | Mobile: | Email: | |
| Trading  name  of  business /person  in  control  of  the  workplace: | | | | | |
| Address  where  the  asbestos  removal  will  take  place:  No Street  name   Suburb Postcode | | | | | |
| Specific  location  within  the  site*(If the site is a large workplace)* | | | | | |
| Type  of  place/plant*(eg. domestic premises, shopping centre, child care centre, plant)* | | | | | |
| Date  the  asbestos  removal  work  is  expected  to  commence | | | | | |
| Date  the  asbestos  removal  work  is  expected  to  finish*:* | | | | | |
| Type  of  asbestos  to  be  removed | | Friable ☐ | | | Non-friable  (bonded) ☐ |
| If friable detail method of removal: | | | | | |
| Estimated  quantity  of  asbestos  to  be  removed  (square or lineal metres/kgs/bags) | | | | | |
| Details of notification of neighbours/neighbouring businesses: | | | | | |

# Notification of the Commencement of Asbestos Removal Work (AR1)

| 1. Details of licensed removalist | | | | |
| --- | --- | --- | --- | --- |
| Name  that  appears  on  the  asbestos  removalist  licence: | | | | |
| Licence  number: | | | Licence  expiry  date: | |
| Licence  class: | A  class  licence: ☐ | | B  class  licence: ☐ | |
| State/Territory/Commonwealth  that  issued  the  licence: | | | | |
| Registered  business  name  of  the  licence  holder: | | | | |
| Contact  details | Office phone: | Mobile: | | Email: |

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| --- | --- | --- |
| **5. Details of workers** | | |
| Number  of  workers  to  be  used  for  the  asbestos  removal  work: | | |
| Name  and  competency  details  of  the  workers  used  for  the  asbestos  removal  work  (attach list if necessary) | | |
| First  Name | Surname | Competency  Details (Include course/module code) |
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| 6. Details of person completing this notification | | | |
| Your name: | | | |
| Position within business or undertaking: | | | |
| Contact details | Office phone: | Mobile: | Email: |
| Signature (not required when lodged by email)  Date: | | | |

## Lodging your notification

This notification is required by WorkSafe Tasmania at least 5 days prior to the intended removal date. In cases where immediate removal is proposed, prior notification by telephone is required and this form is to be subsequently submitted within 24 hours. The notification can be lodged by email, fax, post or personal delivery to our Office and receipt will be acknowledged by email or telephone.

*Email:  asbestos.notifications@justice.tas.gov.au*

*Fax:*  03  6173 0206

*Mail:*  WorkSafe Tasmania,  PO  Box  56  ROSNY  PARK  TAS  7018

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