

SEMI-ANNUAL SURVEILLANCE OF ASBESTOS

NAME OF SCHOOL _____

NAME OF INSPECTOR _____

POSITION WITH THE LEA _____

DATE(S) THAT THE INSPECTION WAS CONDUCTED _____

It is the inspector's responsibility to visually inspect and assess all changes, and record the present status of all Asbestos Containing Building Materials (ACBM) or assumed ACBM that is located in the school building(s), as indicated in the management plan. Please inspect each Homogeneous Area (HA) which contains asbestos.

List ACBM Locations	HA#	Changes			Comments
		No	Min	Maj	

Signature of Inspector _____
Date