

Asbestos Inspection Request



TAMU Environmental Health & Safety
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College Station, TX 77845-4472

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979.845.1348 (f)
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ehsd-asbestos@tamu.edu

Date:

SSC/Compass - Work Order #:

All Other Requestors - Account #:

Must have 1 or 2 as first digit of main account number. For example: 02-100020-90004 or 270003

Project Start Date:

Is survey report requested within five business days, thus pre-approving all RUSH charges? Yes No

Requested By:

Name:

Email:

Phone:

Location Information:

Building Name:

Building Number:

Room No./Area:

Specific Location:

Materials to be Disturbed:

For example: West wall, ceiling, floor, etc.

Access to Area:

Restricted Access?:

Contact for Access:
(Name & Phone #)

Confined Space?:

Any other hazards or restrictions:

Send Report & Invoice To:

Requestor

Other Name:

E-mail:

Contact for Billing Questions:
(Name & Phone #)

Estimated Budget for Inspection:

Additional Notes:

Describe the scope of work. Please attach any supporting documents (plans, drawings, work order, etc.):

Internal Use Only

Inspector	Survey Date	# of Samples	Report Date