

**Asbestos Enclosure Handover Form**  
**Licensed Contractor's Thorough Visual Inspection Form**  
 (to be passed to Analyst before 4-stage clearance starts)  
 Copy to be retained by Licensed Contractor

**Objective: To provide confirmation that the licensed contractor has carried out the thorough visual inspection of the Enclosure (or Work Area) and that the area is clear of visible debris and dust**

**Licensed Contractor:**  
**Address:**

**Removal Site Address:**

Size of enclosure? (see POW) (LxWxH (metres))	
	Yes (Tick to confirm (where appropriate))
Has full access of the site been obtained?	
Has a new pre-filter been installed in the NPU(s)?	
Have all ACM removal locations been checked and certified as free from asbestos?	
Have all floor surfaces/walls/items been inspected and confirmed as visually clean?	
Have all ledges, sills, higher level surfaces (including voids where appropriate) been inspected and confirmed as visually clean?	
Have all cables, wiring, piping, ducting etc been checked and confirmed as visually clean?	
Have all items or equipment brought into or remaining in the enclosure for the clearance procedure (including scaffolding and large waste items) been checked and confirmed as visually clean?	
How long did the supervisor's visual inspection take? Start Time: Finish Time: Total time: Hours/minutes	
<b>I certify that I have carried out a thorough visual inspection of the enclosure/work area and can confirm that the area is visually clean and ready to be made available to the Analyst for the independent 4-stage clearance</b>	Supervisor's signature, date and time
<b>Form to be handed to Analyst before 4-stage clearance starts</b>	Analyst's signature, date and time