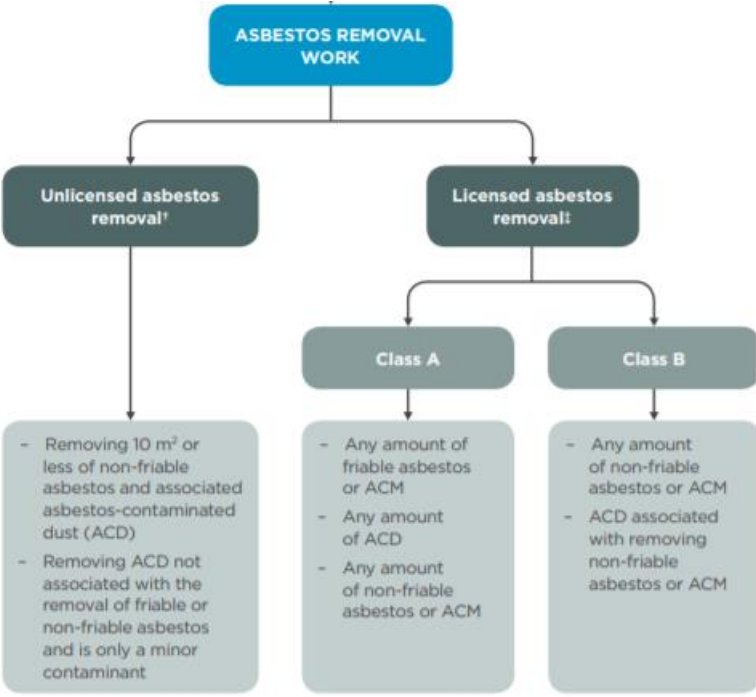



Purpose:	To inform people of the minimum safety standards that must be met when exposure to asbestos is a potential risk at Vessel Works.
Definitions:	Asbestos: naturally occurring fibrous silicate minerals (rock-forming minerals)
Minimum Standards:	<ul style="list-style-type: none"> • Vessel works must be notified and work to be completed in accordance with References; • Area must be contained so to avoid cross contamination of other workspaces; • Only competent persons to complete asbestos related work; • Correct PPE must be worn in accordance with References.
Further Information/References:	<ul style="list-style-type: none"> • Health and Safety at Work (Asbestos) Regulations 2016; • Approved Code of Practice - Management and Removal of Asbestos.
Competency:	<p><i>Competent person:</i> is someone that has the appropriate knowledge and skills to carry out a particular task. This may be acquired through training, qualification, experience, or a combination of these. If the person carrying out the work is not deemed competent they must be closely supervised by a competent person.</p>  <pre> graph TD A[ASBESTOS REMOVAL WORK] --> B[Unlicensed asbestos removal!] A --> C[Licensed asbestos removal!] B --> B1["- Removing 10 m² or less of non-friable asbestos and associated asbestos-contaminated dust (ACD)"] B --> B2["- Removing ACD not associated with the removal of friable or non-friable asbestos and is only a minor contaminant"] C --> D[Class A] C --> E[Class B] D --> D1["- Any amount of friable asbestos or ACM"] D --> D2["- Any amount of ACD"] D --> D3["- Any amount of non-friable asbestos or ACM"] E --> E1["- Any amount of non-friable asbestos or ACM"] E --> E2["- ACD associated with removing non-friable asbestos or ACM"] </pre>

	Minimum Standard for Asbestos Related Activities			
	Version No.:	1.0	Version Date:	22.09.2021
	Objective ID:	A12588615	Page:	2 of 2

Declaration

I declare that the above minimum standards will be complied with while this work activity is carried out.

Company:		Vessel:	
Name:		Contact No.:	
Signature:		Date:	

Vessel Works Approval

(to be completed by Vessel Works Staff)

Checklist	✓ / ✗
1. Are there any other known activities happening in the vicinity that could be incompatible (that increase safety risk)?	
2. Have people in surrounding areas been notified of work?	

Approved By:			
Signature:		Date:	