
ASB NNLW1 – Notification of non-licensed work with asbestos

Contact Details

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Organisation Name	<input type="text"/>	
Email	<input type="text"/>	
Phone no	<input type="text"/>	
Your address		
Property	<input type="text"/>	(e.g. building name or no.)
Street:	<input type="text"/>	(e.g. street)
Locality:	<input type="text"/>	(e.g. district)
Town:	<input type="text"/>	
County:	<input type="text"/>	
Postcode:	<input type="text"/>	

Location of work being notified (Workplace)

Property	<input type="text"/>	(e.g. building name, site identification)
Street:	<input type="text"/>	(e.g. street)
Locality:	<input type="text"/>	(e.g. district)
Town:	<input type="text"/>	
County:	<input type="text"/>	
Postcode:	<input type="text"/>	

Contractor (Client Details)

Contractor

Property (e.g. building name site identification.)

Street: (e.g. street)

Locality: (e.g. district)

Town:

County:

Postcode:

Email:

- Form of Asbestos
- Asbestos Insulation (short duration work)
 - Asbestos Insulation board (short duration work)
 - Textured decorative coating (removal only)
 - Asbestos Cement (substantially degraded only)
 - Other (give details below)

Other (give details)

Estimated Quantity:

No of Workers:

Start Date
(Please use format: dd/mm/yyyy)

Duration (days):

Activity and the Process involved

Measures taken (select all that apply)	Workers trained in control measures	<input type="checkbox"/>
	Use of Class H vacuum	<input type="checkbox"/>
	Use of steaming or gels e.g. for textured decorative coatings	<input type="checkbox"/>
	Use of FFP3 respirator or equivalent and disposable overalls	<input type="checkbox"/>
	Intact removal of intact panels/tiles	<input type="checkbox"/>
	Use of non-powered hand tools and wetting methods	<input type="checkbox"/>
	Dust containment e.g. enclosure	<input type="checkbox"/>
	Other (specify below)	<input type="checkbox"/>

Measures taken
(other)

Please note that HSENI requires a Plan of Work to be submitted with any notification for non-licensed work with asbestos

Please return this form to: HSENI, 83 Ladas Drive, Belfast, BT6 9FR. Northern Ireland
Email: online@hse ni.gov.uk