

Asbestos Survey and Inspection Report Template

Site / Project	_____	Address	_____
Inspector name	_____	Company	_____
Date	_____	Time	_____

Documentation aid only. Adapt this resource to the site, manufacturer instructions, and applicable local requirements. It does not replace a competent person, professional judgment, legal advice, or a required statutory form.

Jurisdiction: Adaptable. Covers OSHA 29 CFR 1926.1101 (US construction) and UK CAR 2012 (Great Britain). This is a planning aid, not a substitute for a qualified asbestos survey. Apply only the section and thresholds for the governing jurisdiction; do not combine US and UK requirements as if they were one code.

Inspection checklist

Survey header

Building name and address

Survey type (Management survey / Refurbishment and demolition survey)

Surveyor name and accreditation

Date of survey

Building information

☐ Year built / last major refurbishment	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Building type and occupancy	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Areas surveyed and areas not surveyed	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Sampling methodology (visual, minor intrusive, destructive)	☐ Pass	☐ Fail	☐ N/A	Notes: _____

Asbestos-Containing Materials (ACM) register

☐	ACM type (TSI, sprayed coatings, AIB, floor tiles/mastics, other)	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Location (floor, room, structural element)	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Material description and approximate quantity	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Condition (intact, sealed, fraying, water-damaged)	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Accessibility and likelihood of disturbance	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Fiber type (chrysotile, amosite, crocidolite, other)	☐	Pass	☐	Fail	☐	N/A	Notes: _____

Risk assessment

☐	Vulnerability to disturbance (Very High / High / Medium / Low)	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Who is at risk (maintenance workers, contractors, occupants)	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Recommended management action (leave in place and monitor / encapsulate / remove)	☐	Pass	☐	Fail	☐	N/A	Notes: _____

Contractor notification

☐	Contractor name and signature (confirming they have reviewed the register)	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	Date of notification	☐	Pass	☐	Fail	☐	N/A	Notes: _____

Prohibited practices (OSHA)

☐	No high-speed abrasive disc saws without HEPA ventilation	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	No compressed air for cleaning asbestos dust	☐	Pass	☐	Fail	☐	N/A	Notes: _____
☐	No dry sweeping or dry shoveling of asbestos debris	☐	Pass	☐	Fail	☐	N/A	Notes: _____

Findings

#	Item	Location	Severity	Action required
1				
2				
3				
4				
5				
6				
7				
8				

Signature

Inspector signature _____

Name _____

Date _____

References consulted

OSHA 29 CFR 1926.1101 – Asbestos

UK HSE – Control of Asbestos Regulations 2012

UK HSE – HSG264: The management of asbestos-containing materials in buildings

UK HSE – Asbestos: The licensed contractor's guide (L153)

Verify the current edition and local adoption before use.