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NORTHERN CALIFORNIA CONFERENCE - OFFICE OF EDUCATION

6FKRRO 1DPH

Insert School Name Above

ASBESTOS INSPECTION FORM

Semi-Annual Surveillance Report

DATE: _____ BLDG NAME: _____ BLDG# _____

ROOM: ,I \$SSOLFDEOH INSPECTOR: _____

The most recent accredited AHERA inspection is used as a basis for this survey.

Asbestos 0 D W H U L D O U nchanged	& R Q W D F W Damage	Water Damage
ODNH DQ REVHUYDWLRQ IRU HYHU\ LWHP RU DUHD OLVWHG RQ WKH	Y/N	Y/N
	Y/N	Y/N
	Y/N	Y/N
	Y/N	Y/N
	Y/N	Y/N
	Y/N	Y/N
	Y/N	Y/N
	Y/N	Y/N
	Y/N	Y/N

Complete a new form for each location indicated on the last AHERA Report

ACTION TAKEN:

INSPECTEDBY: _____ DATE: _____

3OHDVH EH DG YLVHG 7KLV IRUP LV LQ D ILOODEOH 3') IRUPDW I
7KH IRUP PD\ DOVR EH SULQWHG LQ EODQN DQG FRPSOHWHG LQ 2
3HULRGLF VXUYHLOODQFH LV WR EH FRPSOHWHG RQ D VHPL DQQ
VXEPLWWHG WR WKH 1RUWKHUQ &DOLIRUQLD &RQIHUHQFH 2IILFH
,QVSHFWLRQ &RPPHQW &RUHFVLYH \$FWLRQ IRUPV DUH GXH \$ F
EH PDLQWDLQH LQ WKH VFKRRO V \$VEHVWRV ,QIRUPDWLRQ ILOH



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ROOM: _____ INSPECTOR: _____

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Asbestos 0 D W 0 U L D	Unchanged	& R Q W D F W Damage	Water Damage
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N
	Y/N	Y/N	Y/N

Complete a new form for each location indicated on the last AHERA Inspection Report

COMMENTS:

ACTION TAKEN:

INSPECTED BY: _____ DATE: _____

30HDVH EH DG YLVHG 7KLV IRUP LV LQ D ILOODEOH 3') IRUPDW I
 7KH IRUP PD\ DOVR EH SULQWHG LQ EODQN DQG FRPSOHWHG LQ 2
 3HULRGLF VXUYHLOODQFH LV WR EH FRPSOHWHG RQ D VHPL DQQ
 VXEPLWWHG WR WKH 1RUWKHUQ & DOLIRUQLD & RQIHUHQFH 2IILFH
 ,QVSHFWLRQ & RPPHQW & RUUHFwLYH \$FWLRQ IRUPV DUH GXH \$ F
 EH PDLQWDLQH LQ WKH VFKRRO V \$VEHVWRV ,QIRUPDWLRQ ILOH