DEPARTMENT OF HEALTH SERVICES

Division of Public Health F-44016 (Rev. 09/2020) Page 1 of 1

STATE OF WISCONSIN

Bureau of Environmental and Occupational Health DHS 159, Wis. Adm. Code

ASBESTOS OCCUPANT PROTECTION PLAN

This occupant protection plan is mandatory for asbestos abatement in an occupied or furnished facility and shall remain posted for the duration of the asbestos project.

Anyone entering the regulated area must sign in to the project log and should wear appropriate personal protection.

Contractor - Describe the actions taken to ensure the health and safety of building occupants during this project in space below. If handwritten, write clearly and legibly. Post this plan in plain view outside the regulated area for the project.

Occupants - Asbestos is a hazardous substance. The actions described below are meant to protect you and others nearby during this asbestos removal project. It is important to stay out of work areas while work is in progress and until permission is given to re-enter upon completion. The contractor will do daily clean-up, but the regulated work area may still contain dangerous levels of asbestos until final cleaning is completed.

| ASBESTOS COMPANY INFORMATION | | | | | |
|--|-----------------------------|-----------------|---------------------------------------|-------|----------|
| Company Name | | DHS company No. | | | |
| Address | | City | | State | Zip Code |
| Company Contact Person | | | Telephone No. | | |
| ASBESTOS PROJECT INFORMATION | | | | | |
| Property Type or Property Name | | | | | |
| Address | | | City | | |
| Property Contact Person | | | Telephone No. | | |
| Project start date (mm/dd/yy) | Project end date (mm/dd/yy) | | Project work shifts ☐ am ☐ pm ☐ night | | |
| PROJECT DESCRIPTION (Type of project, include type and amount of asbestos-containing material being removed or disturbed) | | | | | |
| PROTECTIVE MEASURES (Describe below actions taken to ensure occupant safety – attach additional sheet, if needed) Containment or barrier system (describe negative air system, glovebag, full containment, mini-containment used for barrier) Ventilation system shutdown (describe areas where ventilation system has been shut down) | | | | | |
| | | | | | |
| Work practices (Describe use of wet methods, debris-lowering system, waste handling methods, etc.) | | | | | |
| Final cleaning and clearance (Describe air scrubbing, HEPA vacuuming, wet cleaning, use of encapsulant, air sampling, etc.) | | | | | |
| WISCONSIN DEPARTMENT OF HEALTH SERVICES – ASBESTOS PROGRAM | | | | | |
| Questions or Concerns? Contact the Asbestos and Lead Section at: 608-261-6876 | | | | | |