**Asbestos Licence Application Form**

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**When completing this Application Form, please refer to the guidance document provided.**

**Company Details**

|  |  |
| --- | --- |
| **Company Name** |  |
| **Company Number (if applicable)** |  |
| **Application Reference Number** |  |
| Please ensure that you state the correct legal name of your company, firm, partnership etc and, for limited companies; the company number registered with Companies House. For partnerships in England and Wales, you must state, in full, the names of all the partners; this is because the licence will be issued to all of the partners and all of their names must be included on it.Please tell us if there is a trading name that you wish to be known by. |

## Number of Emails

|  |  |
| --- | --- |
| Please tell us the **total number of emails** you have sent regarding your application form and supporting evidence. This will help ALU identify when a complete application has been submitted. | **Number of Emails** |
|  |

## Section 1: Director / Relevant Person, Organisation Structure & Roles

|  |  |  |  |
| --- | --- | --- | --- |
| **Details of main company contact(s) for this application** | **1** | Full Name |  |
| Contact Number |  |
| Position in Company |  |
| Email Address |  |
| **2** | Full Name |  |
| Contact Number |  |
| Position in Company |  |
| Email Address |  |

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| **Describe below, with references the Section 1 evidence provided**:* Who will be attending a meeting with HSE if one is considered necessary later in the assessment process.
* Directors, senior managers and key people and their roles and responsibilities.
* Any changes to directors, senior managers and key people since the company was last assessed.
* Your company policy/procedures and arrangements for **short-term/temporary/agency staff**, including how you manage their:
* competence;
* training and TNA;
* personal monitoring, RPE, face-fit testing and PPE;
* health records and medical certificates.
 |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| CV for ---- |  |  |  |
| CV for --- |  |  |  |
| Organisation Diagram |  |  |  |

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## Section 2: Legislative Understanding / Removal, Repair & Encapsulation Techniques / Air Management

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| **Describe below, with references to the Section 2 evidence provided:*** Your legal duties when undertaking licensed work with asbestos.
* The literature you possess to support your understanding.
* Your knowledge and understanding of asbestos removal techniques.
* How these reflect Chapter 7 of the Licensed Contractors’ Guide and current ALG memos.
* How you ensure that appropriate techniques are chosen.
* Your understanding of enclosure ventilation and calculations.
* Anything that has changed since you were last assessed.
* How you have successfully addressed any issues that arose out of a previous inspection / assessment.
 |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| Standard Operating Procedure (SOP)  |  |  |  |
| Health and Safety Policy  |  |  |  |

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## Section 3: Planning & Plans of Work / Site Checks

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| **Describe below, with references to the Section 3 evidence provided:*** How you plan and manage your work on site.
* Your procedure for preparing plans of work.
* Who prepares your plans of work.
* How you ensure that plans of work are checked for quality / suitability.
* How you plan and manage for emergencies on site.
* How you plan and manage welfare on site.
* Your procedure for preparing risk assessments and how you ensure that they are site-specific.
* What your company has done to incorporate HSE’s revised PoW guidance into your PoWs, *Asbestos Regulation 7 plans of work - purpose and core principles*, <https://www.hse.gov.uk/foi/internalops/og/og-00108.pdf>.
* The daily/site checks that you undertake and what is included in these checks, eg inspections of enclosures, air locks, smoke tests, DCUs, NPUs, vacuum cleaners etc.
* Anything that has changed since you were last assessed.
* How you have successfully addressed any issues that arose out of a previous inspection / assessment.
 |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| PoW for --- |  |  |  |
| PoW for --- |  |  |  |
| Site File for  |  |  |  |
| Site File for  |  |  |  |

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## Section 4: Equipment Maintenance / RPE & PPE Knowledge

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| **Describe below, with references to the Section 4 evidence provided:*** Your arrangements to ensure that equipment is managed and maintained regularly by competent staff.
* Your system/procedures/policy for thorough examination and testing and maintenance of DCUs, air extraction equipment and H-vacs.
* The RPE and PPE that you provide for workers and how you select it.
* Your arrangements to ensure that face-fits and daily pre-use checks are undertaken and that RPE is maintained regularly by competent staff.
* How you ensure that face-fit testing for RPE is adequate and that the tester is competent.
* Where employees provide their own equipment, how you ensure that it is fit for purpose prior to any work being undertaken.
* Your laundry arrangements.
* Anything that has changed since you were last assessed.
* How you have successfully addressed any issues that arose out of a previous inspection / assessment.
 |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| Certificate for DCU |  |  |  |
| Documents for DCU |  |  |  |
| Certificate for air extraction equipment  |  |  |  |
| Documents for air extraction equipment |  |  |  |
| Certificate for H-Vac |  |  |  |
| Documents for H-Vac |  |  |  |
| Copy of RPE training certificate(s) for --- |  |  |  |
| Copy of RPE training certificate(s) for --- |  |  |  |
| Copy of current face-fit test certificate(s) for - |  |  |  |
| Copy of current face-fit test certificate(s) for - |  |  |  |

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## Section 5: Decontamination / Site Cleaning & Preparation for Reoccupation / Management & Disposal of Asbestos Waste

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| **Describe below:*** Your knowledge and understanding of the decontamination process.
* Your transit procedure.
* How you avoid the need for transit to the DCU wherever possible.
* Your knowledge and understanding of correct cleaning methods.
* How you carry out a thorough visual inspection at the end of a job.
* How you deal with the 4-stage clearance process.
* How you ensure impartiality and co-operation with the analyst.
* Your knowledge and understanding of packaging, labelling, storing, managing and transferring waste.
* Anything that has changed since you were last assessed.
* How you have successfully addressed any issues that arose out of a previous inspection / assessment.
 |
| **Your Answer:** |
| It is assumed that the evidence for Section 5 will be contained in your SOP, that will be submitted for Section 2 and also the PoWs and site files that will be submitted for Section 3. **You need to clearly reference to the relevant parts of these documents in the table below.**You can also describe what you do in the answer above, as well as referencing to the relevant parts of the SOP and PoWs/site packs for examples of this happening in practice.

| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
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## Section 6: Air / Personal Monitoring & Exposure Records / Health Records & Medical Surveillance

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| **Describe below, with references to the Section 6 evidence provided:*** Your air and personal monitoring strategy.
* The sampling periods you are achieving in your personal monitoring.
* How you ensure that personal monitoring is representative of the range of jobs and work methods being used.
* How your monitoring is used to establish exposure records.
* How else the information from air and personal monitoring is used.
* How you make arrangements with the analyst and discuss how air monitoring will be carried out.
* What you have done to address any high readings.
* Your system for ensuring repeat medical examinations at appropriate intervals.
* Your arrangements for secure 40-year storage of health records.
* Do you have an occupational health programme for workers in addition to the asbestos medicals?
* Anything that has changed since you were last assessed.
* How you have successfully addressed any issues that arose out of a previous inspection / assessment.
 |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| Strategy Plan –  |  |  |  |
| Monitoring Spreadsheet -  |  |  |  |
| Personal monitoring records; exposure records; medical certificate for |  |  |  |
| Personal monitoring records; exposure records; medical certificate for |  |  |  |
| Employer’s Liability Compulsory Insurance (ELCI) Certificate  |  |  |  |
| Accreditation certificate/documentation for face-fits and equipment maintenance  |  |  |  |

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## Section 7: Leadership, Management & Worker Involvement

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| **Describe below, with references to the Section 7 evidence provided:*** How you provide leadership from the top of the organisation.
* Your key person for health and safety, who sets the company's health and safety policy and who sets the standards for working with asbestos.
* How you show commitment to health and safety at work, ie how you demonstrate that health and safety is a priority; what you do on site to promote health and safety; how you set examples of excellent working standards; how you communicate health and safety matters around your organisation and how this is visible.
* How you keep up to date with asbestos-related and other health and safety issues.
* What you do to access competent advice.
* How health and safety are integrated into your business planning processes; the status in your business of health and safety versus production and costs; how you recognise and address the health and safety implications of your business decisions.
* What you see as the top health and safety risks in your business.
* The processes and management arrangements that help you run your business effectively.
* The systems you have in place to assess and manage risk.
* How you manage people on site and how you ensure that standards are being met.
* How you manage contractors.
* How you manage poor performance.
* How you consult and involve employees or their representatives in health and safety matters.
* How effective these mechanisms are in relation to your organisation’s size, structure or rate of workplace change.
* How you ensure that the views of asbestos operatives are taken into account.
* **3** examples demonstrating the actions that you have taken after attending an event such as a trade association meeting or receiving information about a health and safety issue: describe how you disseminate the information to your staff and how you follow it up.
* How you capture the discussions and outcomes of meetings where health and safety is discussed and how you cascade the information and actions to the workforce afterwards.
* **3** examples where you have recently taken forward a health and safety-related suggestion from your asbestos workforce.
* Anything that has changed since you were last assessed.

How you have successfully addressed any issues that arose out of a previous inspection / assessment. |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

| Name of Document(please input the exact name as the attachment submitted)) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| Evidence 1 |  |  |  |
| Evidence 2 |  |  |  |
| Evidence 3 |  |  |  |

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## Section 8: Competence & Training

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| **Describe below, with references to the Section 8 evidence provided:*** How you assess competence.
* How your company's policy/strategy/system on assessing competence and training needs reflects the guidance given in Chapter 4 of HSG247.
* How you conduct, manage and record training needs analyses (TNAs).
* How you organise training.
* How you review training records and keep them up to date.
* How you include all levels within the organisation in training and assessing competence.
* How you deal with non-asbestos training needs and competence.
* Anything that has changed since you were last assessed.
* How you have successfully addressed any issues that arose out of a previous inspection / assessment.
 |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| Policy/System for assessing competence and training needs  |  |  |  |
| Copy of current TNA’s and training certs for  |  |  |  |
| Copy of current TNA’s and training certs for  |  |  |  |

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## Section 9: Measuring Performance & Reviewing Arrangements

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| **Describe below, with references to the Section 9 evidence provided:*** How you measure the performance of your business when working with asbestos.
* How you review your performance and develop action plans.
* Your audit strategy.
* How often audits (internal or external/independent) are carried out.
* How you ensure that audits are as effective as possible, eg are they announced or unannounced, are they asking the right questions?
* How you audit your own work internally.
* Other measures that you use to measure performance, eg TNAs through site observation, site inspections, other structured site visits, directors’ tours, key performance indicators, audits of procedures and records, personal and background monitoring, appraisals etc.
* What you do with audit results and other forms of feedback.
* **3** examples of how your company has fully addressed concerns raised by Inspectors and prevented them from reoccurring.
* **3** examples of how your company has fully addressed non-compliances/ concerns raised by external auditors and prevented them from reoccurring.
* How you find out about health and safety incidents that have happened within your business.
* Anything that has changed since you were last assessed.
* How you have successfully addressed any issues that arose out of a previous inspection / assessment.
 |
| **Your Answer:** |
| **Please complete the pre-populated table below with the evidence required to be submitted. If you cannot provide the required evidence (or an alternative document of equal relevance), please explain the reason why below:** **Reason:**

| Name of Document(please input the exact name as the attachment submitted) | Number of pages | Exact location in document(page numbers, title of section, paragraphs) | If cross-referencing a document already linked to another section, state the exact location and the section number to which the document is already attached |
| --- | --- | --- | --- |
| **Please refer to the guidance document for full details on the required document(s) to submit** |  |  |  |
| Company’s strategy/system/plan for measuring performance  |  |  |  |
| External (independent) Audit 1 ---- |  |  |  |
| External (independent) Audit 2 ---- |  |  |  |
| External (independent) Audit 3 ---- |  |  |  |
| Internal Audit 1 --- |  |  |  |
| Internal Audit 2 --- |  |  |  |
| Internal Audit 3 --- |  |  |  |
| Spreadsheet/Report – Actions on Audits etc |  |  |  |
| Management Audit – copy of ISO 45001 (Occupational Health & Safety) and/or ISO 9001 (Quality Management) if certified –  |  |  |  |

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## Declaration

I declare that:

* As a person named in Section 1, I am responsible within the organisation for asbestos operations.
* I have the appropriate authority within the organisation to represent and bind the company.
* It is intended that the organisation will carry out licensable asbestos work.
* I declare that I have checked the answers given in the application and, to the best of my knowledge, they are correct.
* I am aware that it is an offence under Section 33(1)(k) of the Health and Safety at Work etc Act 1974 to make a false declaration and may result in an asbestos licence being revoked and further action being taken.

|  |  |
| --- | --- |
| Name  |  |
| Position in Company |  |
| Date of Declaration  |  |