

**INSTRUCTION TO CARRY OUT WORK: INFORMATION REQUIRED FROM CLIENT - ASSESSOR**

Please return completed form and required documentation to CES 2-4 Bell Road South, 5010 Gracefield, Lower Hutt. Enquires@fibres.co.nz Please complete all sections.

SECTION A: GENERAL

Requested by: (Name) _____ On: _____

Company: _____ Works Order/OP no: _____

Invoice to: _____
Site Contact (Removalist or PM Name & Tel No) _____

Site Address: _____

Type of work required:

AIR MONITORING: Clearance / Reassurance / Background / Leak

SMOKE TEST YES NO

OTHER: _____ **Date work required:** _____

Any special instructions: _____

CES CLIENT ACCOUNT FORM COMPLETED: DATE: _____ YES NO

SECTION B: CLEARANCE / AIR MONITORING

Please provide the following information (tick boxes, as appropriate and requested documents, completed by removalist on behalf of Client PCBU as a minimum).

CLEARANCE:

In accordance with legislation we require the following information prior to conducting a clearance:

Information and Documents Required Where Applicable	Signed / Attached YES/NO/NA	Initial
Section A - C Completed		
A copy of the Site Asbestos Removal Control Plan		
A copy of the Site Specific Safety Plan		
A copy of your Work Safe Notification		
PCBU Details - You must provide full contact and invoicing details for your Workplace and Client PCBU.		
Confirmation that the Removalist has inspected the site prior to request		
Confirmation and contact details of the COC / Supervisor who will be on site at time of clearance		
Completed Client Account and Terms and Conditions We require confirmation and appropriate documentation from the PCBU and Requesting Client prior to works.		

Please note the above is a minimum requirement for clearance, we reserve the right to require additional information.

SECTION C: ACKNOWLEDGEMENT

I / We _____ (Name(s)) as an authorised representative of _____ (Company Name) have read and understood the above material and associated terms and conditions as provided by CES, and the information provided on our website including the [General Information section](#).

Name (Print): _____

Signature: _____ DATE: _____