



Health and Safety at Work etc Act 1974  
Asbestos (Licensing) Regulations 1983

# Notification Form

The Data Protection Act 1998 requires the Health and Safety Executive (HSE) to inform you that this form may include information about you (this is called 'personal data' in the Act) and that we are a 'data controller' for the purposes of this Act. HSE will process the data for health, safety and environmental purposes. HSE may disclose this data to any person or organisation for the purposes for which it was collected or where the Act allows disclosure. As data subject, you have the right to ask for a copy of the data and to ask for any inaccurate data to be corrected.

- Please read the notes attached before completing this form
- Please use block capitals

- When completed, please return this form to the appropriate authority
- This form may be photocopied for use in subsequent notifications.

## 1 Licence holder details

Name	<input type="text"/>	Licence number	<input type="text"/>
Address	<input type="text"/>		Expiry Date <input type="text"/>
		Postcode	<input type="text"/>
Telephone No	<input type="text"/>	Fax No	<input type="text"/>
e:mail address	<input type="text"/>		
Name of person dealing with job	<input type="text"/>	Mobile Telephone No	<input type="text"/>

## 2 Occupier or employer or contractor to whom the licence holder is contracted

Name	<input type="text"/>	Contact person	<input type="text"/>
Telephone No	<input type="text"/>	Mobile Telephone No	<input type="text"/>

## 3 Details of job

Site address where asbestos work is to be carried out	<input type="text"/>	Local Authority Area (see note 1 attached)	<input type="text"/>
Exact work location/description of where on these premises work is to be carried out (see note 2 attached)	<input type="text"/>		
Site telephone no:	<input type="text"/>	Actual start date of set up on site (see note 3 attached)	<input type="text"/>
		Expected duration of work (days)	<input type="text"/>
Type of work to be undertaken (please tick a box)			
Asbestos coating <input type="checkbox"/>	Textured coating (Artex) <input type="checkbox"/>	Asbestos insulation <input type="checkbox"/>	Asbestos insulating board <input type="checkbox"/>
Other <input type="checkbox"/>	(please specify) <input type="text"/>		
Activity - does the work involve?	Dry stripping <input type="checkbox"/>	Use of power tools <input type="checkbox"/>	Work on or in proximity to hot surfaces <input type="checkbox"/>
<small>(These work methods should be avoided. If you have ticked any of these boxes justification must be included in a separate note: specific reference to control measures must be included in the method statement)</small>			
Size of job (see note 4 attached)	<input type="text"/>	Maximum number of persons employed in the work at any one time	<input type="text"/>

## 4 Other asbestos licence holders information

Are any other asbestos licence holders involved in the work/subject? Yes  No

Name

In what capacity are they involved? (eg supplying labour, ancillary/supervisory work)

Signature	<input type="text"/>	Date	<input type="text"/>
Print Name	<input type="text"/>	Position	<input type="text"/>

The notification period starts when this form, accompanied by a suitable/acceptable method statement is received by the enforcing authority