Risk Assessment Data



Asbestos Surveys

C	ample 3	1	Sample D	ate	17/03/200	 5				
]]								
Stallua			Surveyor							
			.							
				noroto ol	adding to walls					
iai Area oo Ge		5 Packing	sups under co							
ion		Product Ty	/pe		Damage					
0	Cement	t	1	Non	e	0				
eatment		Accessibil	ity		Size / Area					
3	Unlikely	/	0		Large					
Asbest	os Type		Analysis		Risk Factor	5				
Chry	rsotile 1	-	Significant		Risk Band	D				
Recommended Action To Be Taken										
Minor	Risk Material R	equiring Ar	nnual/Biennial)	inspectio	n					
	Standa nal Area 66 Ge ion 0 eatment 3 Asbest Chry	ion 0 Cement eatment 3 Unlikely Asbestos Type 1 Chrysotile 1 Recommer	Standard Sampling Yes Sample Details / I nal Area 66 General Externals Product Ty 0 eatment 3 Unlikely Asbestos Type Chrysotile 1 Recommended Actio	Standard Sampling Surveyor Yes Sample Details / Description nal Area 66 General Externals Packing stips under condition nal Area 66 General Externals Packing stips under condition ion Product Type 0 Cement 1 eatment Accessibility 0 3 Unlikely 0 Asbestos Type Analysis Significant Chrysotile 1 Significant	Standard Sampling Surveyor Yes Sample Details / Description nal Area 66 General Externals Packing stips under concrete classical ion Product Type 0 Cement 1 Non Accessibility 0 eatment 3 Unlikely 0 Asbestos Type Analysis Significant Chrysotile 1 Significant	Standard Sampling Surveyor Laura Griffit Yes Sample Details / Description nal Area 66 General Externals Packing stips under concrete cladding to walls ion Product Type Damage 0 Cement 1 Accessibility O Size / Area 3 Unlikely 0 Large Asbestos Type Analysis Risk Factor Chrysotile 1 Significant Risk Band				

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Hchem Ltd.

Survey Ref HC8381-3 Printed 22/06/2009 Section 5.5

Asbestos Surveys - www.asbestos.co.uk

Site Survey Details



External

Area 66 General Externals										
Survey Descrip	tion	Solid walls.								
Non Accessible	Areas	Modern roof felt to canopies over bar underside of barrier canopies, panels								
Sample Ref	<u>Samp</u>	le Description	Asbestos Found	<u>Risk Band</u>						
Sample 3	Pacl walls	king stips under concrete cladding to	Yes	D						

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Hchem Ltd.

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Asbestos Surveys - www.asbestos.co.uk

Survey Ref HC8381-3 Printed 22/06/2009 Section 4.19



	RECELVED 2 0 JUL 2009 PRODUCER'S/CARRIEN'S/CONSIGNOR'S COPY DATE AND ADDR		4 The waste will be taken to (name, address and porypode): Alfurd Furth Cord, Port B. BHISLM O 122-673 CTTT A 2022 CBR, 759 postcode, telephore, e-mail, factimile): AS M.	PART B Description of the waste 1 The process giving rise to the wastely was: A.D. b.	The chemicalibiological compenents of Physical form the waster and their concentrations are gas, liquid, solid, tops, number component (concentration armixed) and size provider, solid, even and size (si or mayke) and size provider, solid, and solid, a		Proper Mipping name(s) UN class(es) Special handling	Chrysolule 9 bayed Jagess	PART D Consignor's certificate	It I contriby that the information in A, B and C above is correct, that the carrier is registered or exempt and was advised of the appropriate precaudionary measures. All of the wasts is packaight and the ballefled correctly and the carrier has been advised of any special handling requirements. 1. Consignor name: Definited and any advised propriate precaudionary content of frame, address, postcode, telephone, e-mail, fastimile); Signature Definited A, AMA	spectra for the information given below must be completed for each PWCI	EWC code Waste management operation (R or D code) accepted/rejected	SA Sad	ATZOCA Time 1 630	On behalf of (name, address, postcode, telephone, e-mail, facsimile): AS AS	Signature Strand (KRD)
HUL O	The Hazardous Waste Regulations 2005: Consignment Note	PART A Notification details	1 Consignment note code: <u>APLI I 21/ASE00</u> 2 The waste described below is to be removed from (name, addres, postode, telephone, email, tacimile): Query VEXES Garger, A O UN DI Archaer (A Part S Cargori, A O UN DI Archaer (A Part S Cargori, A ALIV D) 3 Premises code (where applicable): <u>AALIV D</u>	PART B Description of the waste 1 The process giving rise to the wasteld was. A DA F D D A COURT 3 WASTE DETAILS (where more than one waste type is collected all of the initi	Description of waste (EWC code) (6 digits) (49). The chemical biological components of (50) (49). (49) (49) (49) (49) (49) (49) (49) (49)	-	EVC code Packing group(s) UN identification Property	1 70605 III 2540	PART C Carrier's certificate	If more than one carrier is used, please attach schedule for subsequent carriers. It a schedule of carriers is attached tick here □) I certify that I today collected the consignment and that the details in A2 A3 and B3 are correct and I have been advised of any specific handling requirements. I. Carrier name: □And B3 are provided in any pecific handling consenents. On behalf of (name, addrew, postcode, telephone, e-mail, facimile): A behalf of (name, addrew, postcode, telephone, e-mail, facimile): A vehicle registration no. for mode of transport, if not road): Signature	PART E Consignee's certificate (where more than one waste ty	Individual EWC Quantity of each EWC code received (kg) code(s) received	07 5000	1 received this value at the address given in A4 on: Date / O O 7 2 O O 7 Time [2 0]	+ $+$ $+$ $+$ $ +$ $ +$ $ +$ $ +$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$	I certify that waste management licencebermitzautherized exemption not(a) 23656 authorizes the management of the waste described in B at the address

WConcrete Repair Ltd

Churchill House, Office One, 57 Jubilee Road, Waterlooville, Hampshire PO7 7RE Tel: 02392 261222 Fax: 02392 261227 E:uk.cr@btconnect.com

> Specialist Contractors For: Concrete Repairs Structural Repairs Resin Injection Resin/ Polymer Flooring Waterproofing Civils

Poole Borough Council Transportation Services 3rd Floor St Johns House Serpentine Road Poole Dorset BH15 2DX

27th July 2009

By Post and By Email (c.tufnell@poole.gov.uk)

FOR THE ATTENTION OF MR CLIVE TUFNELL

Dear Sir,

REF: QUAY VISITORS CAR PARK - FIN REMOVAL

Further to our completion of our works to remove concrete fins from the above building, please find enclosed (5) five in number asbestos removal from site certificates. Could you place these in the Health & Safety document provided to you. Also for inclusion in Health and Safety file this letter. Please find name and address of the Licensed Waste Removal Company – Ref Removal from site of concrete fins removed from building:-

Grab Hire Services 52 Fernside Road Poole Dorset BH15 2JJ Telephone number: 01202 649067

I trust this meets with your approval. Should you have any queries or require any further information, please contact me on the above number or my mobile 07973 814873.

Yours sincerely Allor

A S Mackin MQS

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PRODUCER'S/CARRIER'S/CONSIGNOR'S C	COPY	(Delete as appropriate)
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PART A Notification de	etails		en se		B		STATUS -			
 1 Consignment note code: 1 Consignment note code: 1 Consignment note code: 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): 2 Republicators (ar far far far far far far for far far far for for for far far far for for for far far far for for for for far far far for for for far far far for for for for for for for for for fo										
PART B Description of		E	16			1942	If conti	nuation	sheet used	l, tick here
1 The process giving rise to the waste(s) was: As bestos Nemoval 2 SIC for the process giving rise to the waste: 3 WASTE DETAILS (where more than one waste type is collected all of the information given below must be completed for each EWC identified)										
Description of waste		ical/biologic			Physical for		Hazard code(s)	Container type, number		
	(EWC code) (6 digits) (k	g)	Compone	and their co	Concentrat	tion	(gas, liquid, powder, slue or mixed)		code(s)	and size
Com De las	170605 3	0	11	ett.	(% or mg/	(g)	01	1	HI	1/00:
coment lactes	I FOODS a		chig	ome		0	sole	1	111	Vari
The information given below	is to be completed for each	EWC idea	ntified						·	
	q qroup(s) UN identifica			pping name	(5)	UN	class(es)	Speci	al handling	3
17 a Kalt T	number(s)	16	0	I att q			7	requi	rements	111000
1 F0 0 0 5 1	11_ 259	0	0	ingso	ure	- 1	/	bag	60 150	HALSSO
PART C Carrier's certifi	cate	1.71.16	-	PART D	Consign	or's c	ertificate	-		
PART C Carrier's certificate (If more than one carrier is used, please attach schedule for subsequent carriers. If a schedule of carriers is attached tick here.]) I certify that I today collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. 1 Carrier name: On behalf of (name, address, postcode, telephone, e-mail, facsimile): AS AG 2 Carrier registration no./reason for exemption. 2 Vehicle registration no. (or mode of transport, if not road): Signature Date					ed or exemp All of the w advised of a	AS	vas advised o packaged an ial handling CATU postcode, te	of the ap d labell require	opropriate led correctl ments. e, e-mail, f	that the carrier precautionary y and the carrier acsimile):
PART E Consignee's cer	tificate (where more than	0000	to tupo is co	llected all of	the informa	tion ai	van below m	ut bo co	mplated fo	or each EWC)
	ity of each EWC code receive		te type is co	EWC code accepted/i			ste managem		1.51 5.51	
								-	-	
1 I received this waste at the a	ddress given in Ad env	ate			Time]			
2 Vehicle registration no. (or r3 Where waste is rejected pleat	node of transport if not road	d):	ion no(s)	Name: On bel		le, addr] ress, postcode	e, telepł	ione, e-ma	il, facsimile):
I certify that waste manageme	ne neence/permit/authorised	exempti		Signat	ure					
authorises the management of given in A4.	the waste described in B at	the add	ress	Date			Т	ime		

The Hazardous Waste	Regulations 2005:
Consignment Note	

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PRODUCER'S/CARRIER'S/CONSIGNOR'S COPY	(Delete as appropriate)
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PART A Notifica	tion details			ALCONT NO.						and the second	
 1 Consignment note code: NACIIZ ASOOD 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): 2 Martin Carlor Carlor											
PART B Description of the waste											
1 The process giving rise to the waste(s) was: A pastos 2 SIC for the process giving rise to the waste: UK.25/ 3 WASTE DETAILS (where more than one waste type is collected all of the information given below must be completed for each EWC identified)											
Description of waste List of wastes Quantity The chemical/biological components of Physical form Hazard Container the waste and their concentrations are: (gas, liquid, solid, code(s) type, number							Container type, number				
	(EVVC	code) (6 digits)	(kg)	Compone		Concentrations (% or mg/kg	on powder, sli or mixed)		code(s)	and size	
Coment Thi	lor 17	20005	20	Chas	otelo	75%	Sola	1	17	Van	
(criter) rut				cray			Jerry				
The information give	n below is to be	completed for ea	ach EWC ide	entified							
EWC code	Packing group(s) UN identification Proper sh number(s)			Proper shi	pping name(s) UN class(es)				Special handling requirements		
170005	TT	2590)	Chry	Botel	sotile		ß	lagged Kuppersed		
				/		11			1.	10	
PART C Carrier's	certificate	to the second of the			PART D	Consigno	r's certificate	8 - L			
PART C Carrier's certificate PART D Consignor's certificate (If more than one carrier is used, please attach schedule for subsequent carriers. If a schedule of carriers is attached tick here.]) I certify that I today collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. I certify that I today collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. I certify that I today collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. I certify that I doday collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. I consignor name: Different Carrier has been advised of any special handling requirements. 1 Carrier name: On behalf of (name, address, postcode, telephone, e-mail, facsimile): A S A4 2 Carrier registration no./reason for exemption 244473 3 Vehicle registration no. (or mode of transport, if not road): A S A4							precautionary y and the carrier				
Signature					Signature	D	d.				
Date	Т	Time]		Date (3072	009 Tim	e Ø 8	20		
PART E Consign	ee's certificat	te (where more t	han one wa	ste type is co	ollected all o	f the informati	on given below n	nust be c	ompleted fo	or each EWC)	
Individual EWC code(s) received		ach EWC code rec			EWC code		Waste manage				
 1 I received this waste 2 Vehicle registration 3 Where waste is reje 	no. (or mode of	f transport if not	Date road):		Name On be		address, postcoo	de, telep	hone, e-ma	il, facsimile):	
I certify that waste ma			ised exemp	tion no(s)							
		- aperini additor	en enemp		Signa	ture					
authorises the manag given in A4.	ement of the wa	aste described in	B at the add	dress	Date	e		Time			

Tues



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PRODUCER'S/CARRIER'S/CONSIGNOR'S COPY (Delete as appropriate)

PART A Notification details									
 1 Consignment note code: 1 Consignment note code: 1 Consignment note code: 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): 3 Premises code (where applicable): 3 Premises code (where applicable): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 4 The waste will be taken to (name, address, and/postcode): 5 The waste producer was (if different from 2) (name, address, postcode, telephone, e-mail, facsimile): 4 The waste will be taken to (name, address, and/postcode): 5 The waste producer was (if different from 2) (name, address, postcode, telephone, e-mail, facsimile): 5 The waste producer was (if different from 2) (name, address, postcode, telephone, e-mail, facsimile): 5 The waste producer was (if different from 2) (name,									
PART B Description of the waste									
1 The process giving rise to the waste(s) was: As hest to heve to heve to heve to heve the waste 2 SIC for the process giving rise to the waste: US 3 WASTE DETAILS (where more than one waste type is collected all of the information given below must be completed for each EWC identified)									
(EWC code) (6 digits) (kg) the v				and their co	al components incentrations a Concentratio (% or mg/kg	are: (gas, liquid, powder, slu on or mixed)	solid, co	azard ode(s)	Container type, number and size
Coment Packer	17000	5 20	Chres	sotile	75%	Sola	H	7	Van ·
,			/						
The information given below	is to be completed f	or each EWC ide	entified						
EWC code Packin	EWC code Packing group(s) UN identification Proper sh number(s) Proper sh			ipping name	(5)	UN class(es)	class(es) Special handling requirements		
170005 I	IF 25	590.	Ch	ysotic	e	9	9 Baged Suppers		
			-				11		// /
PART C Carrier's certifi	cate	No. of Concession, Name		PART D	Consigno	r's certificate	in the second second	-	and the second second
(If more than one carrier is used, please attach schedule for subsequent carriers. If a schedule of carriers is attached tick here.]) I certify that I today collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. 1 Carrier name: On behalf of (name, address, postcode, telephone, e-mail, facsimile): AS A4A 2 Carrier registration no./reason for exemption 200073 3 Vehicle registration no. (or mode of transport, if not road):					ed or exempt All of the war advised of any nor name: A	ation in A, B and (and was advised of ste is packaged and special handling CATLE dress, postcode, te AS A4	of the appro- d labelled requirement lephone, e	opriate (correctly nts.	precautionary y and the carrier
Signature Date	Time			Signature Date	3072		084	6	
	r tificate (where m		ste type is c	ollected all of EWC code accepted/		tion given below must be completed for each EWC) Waste management operation (R or D code)			
1 I received this waste at the a	address aiven in A4 (on: Date	TT		Time		1		
2 Vehicle registration no. (or r3 Where waste is rejected pleat	node of transport if			Name: On be		address, postcode	e, telephon	e, e-mai	il, facsimile):
I certify that waste manageme	nt licence/permit/au	thorised exemp	tion no(s).						
authorises the management of given in A4.	f the waste describe	d in B at the add	dress	Signat	1111	Т	ime		

THURS

PRODUCER'S/CARRIER'S/CONSIGNOR'S COPY	(Delete as appropriate)
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PART A Notification details										
 1 Consignment note code: MELVIZIAS000 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): Carrey Visitors Carparh Old Orchard Paolo BHIS ISD 3 Premises code (where applicable): 										
3 Premises code (where applicable): NECTILL IN H4										
PART B Description of the waste	If continuation sheet used, tick here									
1 The process giving rise to the waste(s) was: 3 WASTE DETAILS (where more than one waste type is collected all of the information given below must be completed for each EWC identified)										
	nical/biological components of e and their concentrations are: ent Concentration (% or mg/kg) Concentration (% or mg/kg) Concentration									
Cement Packer 170005 20 Chry	solid HT Van									
The information given below is to be completed for each EWC identified										
EWC code Packing group(s) UN identification Proper sh number(s)	hipping name(s) UN class(es) Special handling requirements									
170605 TEE 2590 Ch	rysotte 9 bagged /suppos									
PART C Carrier's certificate	PART D Consignor's certificate									
 (If more than one carrier is used, please attach schedule for subsequent carriers. If a schedule of carriers is attached tick here. I certify that I today collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. 1 Carrier name: On behalf of (name, address, postcode, telephone, e-mail, facsimile): 	I certify that the information in A, B and C above is correct, that the carrier is registered or exempt and was advised of the appropriate precautionary measures. All of the waste is packaged and labelled correctly and the carrier has been advised of any special handling requirements. 1 Consignor name: DCATUEY. On behalf of (name, address, postcode, telephone, e-mail, facsimile): A3 A4									
2 Carrier registration no. (or mode of transport, if not road):										
Signature Date Time	Signature D Q Q Date 0 3 0 7 2 0 0 Time 0 9 0 0									
	ollected all of the information given below must be completed for each EWC									
Individual EWC Quantity of each EWC code received (kg)	EWC code Waste management operation (R or D code)									
 1 I received this waste at the address given in A4 on: Date 2 Vehicle registration no. (or mode of transport if not road): 3 Where waste is rejected please provide details: 	Name: On behalf of (name, address, postcode, telephone, e-mail, facsimile):									
I certify that waste management licence/permit/authorised exemption no(s).										

Signature

RECEIVED 2 0 JUL 2009

PRODUCER'S/CARRIER'S/CONSIGNOR'S COPY (Delete as appropriate)

PART A Notification details									
 1 Consignment note code: NELLIZASOO 2 The waste described below is to be removed from (name, address, postcode, telephone, e-mail, facsimile): Quay Visytos Carpethi Old Orchard Paper ANTS ISD 4 The waste will be taken to (name, address and postcode): A plusa Environment of Content of Co									
3 Premises code (where applicable): NALIV2 ASAG									
PART B Description of the waste									
1 The process giving rise to the waste(s) was: 3 WASTE DETAILS (where more than one waste type is collected all of the information given below must be completed for each EWC identified)									
Description of waste List of wastes Quantity The che (EWC code) (6 digits) (kg) the was				ical/biologic	al components incentrations a	of Physical for are: (gas, liquid,		Hazard code(s)	Container type, number
21			Compone	ent	Concentratio (% or mg/kg)		dge		and size
Consent Packes 1	70005	20	Chry	rstile	75%	Soliq	1	HZ	Van.
The information given below is to	he completed for eac	h EWC ide	ntified				_		
					(s)	UN class(es)		al handling	1
170605 711	= 2540	,	Ch	rikol	te	9	9 bag		Kenessd
				1			1	-4	10.1
PART C Carrier's certificate	9			PART D	Consigno	r's certificate			
carriers. If a schedule of carriers is a least of the carrier of t	 (If more than one carrier is used, please attach schedule for subsequent carriers. If a schedule of carriers is attached tick here.]) I certify that I today collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. 1 Carrier name:					I certify that the information in A, B and C above is correct, that the carrier is registered or exempt and was advised of the appropriate precautionary measures. All of the waste is packaged and labelled correctly and the carrier has been advised of any special handling requirements. 1 Consignor name: D CATLEY On behalf of (name, address, postcode, telephone, e-mail, facsimile): ASAA			
3 Vehicle registration no. (or mode Signature	Time	oad):		Signature Date	DG 3072	OOG Time	09	20	
PART E Consignee's certific	cate (where more tha f each EWC code recei		te type is co	ellected all of EWC code	the informatio	on given below m Waste managem			
code(s) received		rea (ng)		accepted/r	ejected		C		
	20			1 70	005	Þ	12		
1 I received this waste at the addre	ess given in A4 on:	Date 1 C	2072	009	Time 1 4	30	-		
2 Vehicle registration no. (or mode HGOFNR		ad):		Name:	DC	ATLEY address, postcode			
3 Where waste is rejected please p				On ber	hait of (name,	AS AS		none, e-mai	i, facsimile):
I certify that waste management lic		ed exempt	ion no(s).		~				
authorises the management of the	<u> </u>	at the add	ress	Signat		26691	ime (630	

FRI-