ROCKHAMPTON ASBESTOS & DEMOLITION

RAD

VISUAL CLEARANCE CERTIFICATE

1. Date of Inspection: 18 December 2024

2. Client: Grant Farrell - CQU

3. Client Contact Details: Grant 0407 760 770

4. Address where asbestos removal was undertaken:

Residential Building 62 - Level One Male Bathroom

5. Date & Time of Clearance Inspection:

Date: 18/12/2024 **Time**: 2 PM

6. Notes:

7. Do you have a copy of the Notification Form (Form 65)?	*Yes*
8. What type of ACM was removed	~~*Friable*~~ / *Non-friable*
8. Was air monitoring required?	~~*Yes*~~ / *No*
If yes are the results available from a NATA Laboratory?	*N/A*
9. Was any ACM visually identified in the work area?	~~*Yes*~~ / *No*
10. Can the area be reoccupied?	***Yes*** / ~~*No*~~

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DECLARATION

11. After a visual inspection of the asbestos removal area at:

Residential Building 62 - Level One Male Bathroom

I declare that the area is free from any visble asbestos containing materials and the route between the removal area and the loading area is free from any loose ACM debris.

12. Description of removal: approximately 40 sqm of ceiling sheets. ACM was wrapped in dirty zone and then loaded into transport vehicle. All battens were also removed.

_____

Signature of Competent Person

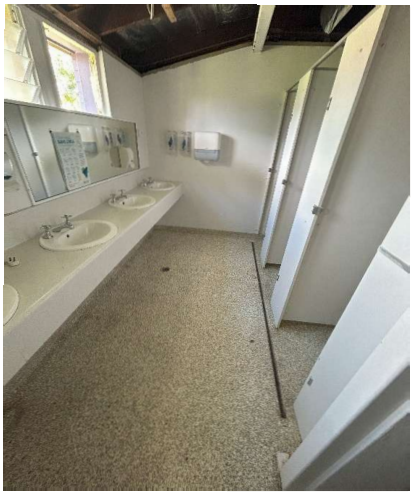
Adrian Price

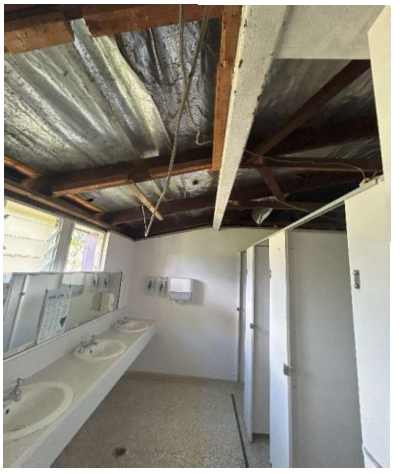
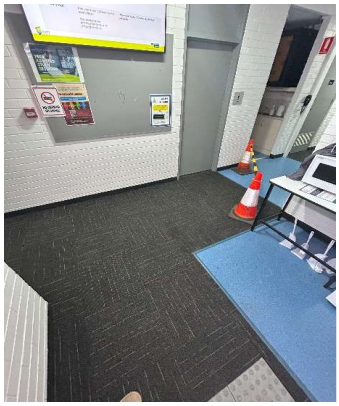
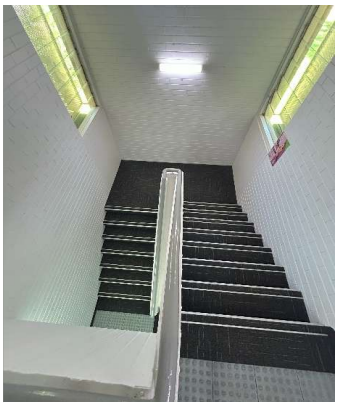
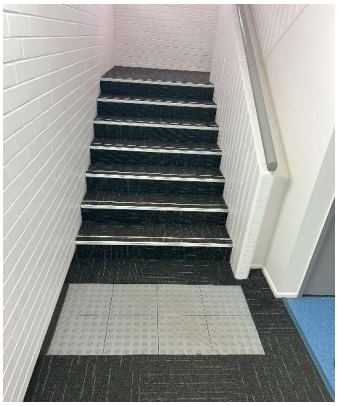
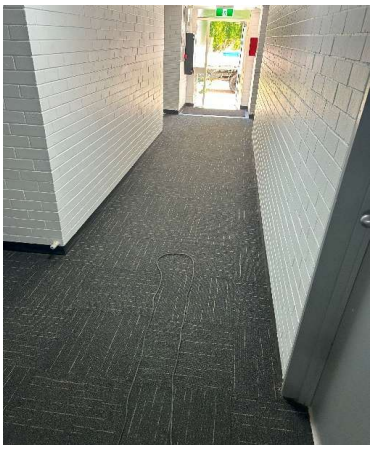
_____

Name of Competent Person

13. Date: 18 December 2024

Residential Building 62 - Level One Male Bathroom

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