



ASBESTOS REMOVAL CONTROL PLAN

1. Organisation Details

| | | | | | |
|------------------|--|--------------|---|---------------------|---------------------------------------|
| Company Name | <input type="text" value="Australasian Technical Services (NSW) Pty Ltd"/> | ABN | <input type="text" value="87 603 981 522"/> | A Class Licence No. | <input type="text" value="AD212177"/> |
| Business Address | <input type="text" value="9 Phiney Place"/> | Contact Name | <input type="text" value="Sam Chea – (Project Manager)"/> | | |
| | <input type="text" value="Ingleburn"/> | Phone | <input type="text" value="02 9605 4733"/> | | |
| State | <input type="text" value="NSW"/> | Postcode | <input type="text" value="2565"/> | | |
| | | Email | <input type="text" value="sydney@atstech.com.au"/> | | |

2. Project Details

| | | | | | | | |
|---------------------------------|--|-------------------------------------|-------------------------------------|--|--|-------------------------|---|
| Start Date | <input type="text"/> | Start Time | <input type="text" value="7.00am"/> | End Date | <input type="text"/> | ARCP Number | <input type="text" value="7258"/> |
| ATS Asbestos Removal Supervisor | <input type="text" value="Sucheth Lam, Heng Ly Heang, Samnang Moeln (proposed but may change depending on availability)"/> | | | | | No. of workers required | <input type="text" value="2"/> |
| Activity/Task | <input type="text" value="Supervise the excavation and load out of asbestos contaminated soil"/> | | | | | | |
| Client Name | <input type="text" value="Aitken Civil Engineering Pty Ltd"/> | | | ABN | <input type="text"/> | | |
| Site Address | <input type="text" value="Epping West Public School – Block G"/> | | | Client Contact | <input type="text" value="Stavros Stavrakakis"/> | | |
| | <input type="text" value="96 Carlingford Road"/> | | | Phone | <input type="text" value="0403 211 324"/> | | |
| | Suburb | <input type="text" value="Epping"/> | Postcode | <input type="text"/> | | Other | <input type="text"/> |
| Hygienist/Assessor | <input type="text" value="Envirox"/> | | Contact Name | <input type="text" value="Zeyn Ismail"/> | | Phone | <input type="text" value="0401 163 516"/> |
| SafeWork Notification | <input type="text"/> | | Date Notified | <input type="text"/> | | Expiry | <input type="text"/> |
| Notes | <input type="text"/> | | | | | | |



3. ARCP Preparation

| | | | | | |
|-----------------------------------|--|---|--|--|-------------------------------------|
| ARCP prepared by | Sam Chea | | Date Prepared | 27.10.2021 | Revision No: 2 |
| Consultation with: | <input checked="" type="checkbox"/> ATS Supervisor | <input checked="" type="checkbox"/> ATS Workers | <input checked="" type="checkbox"/> Aitken | <input checked="" type="checkbox"/> SafeWork NSW | <input checked="" type="checkbox"/> |
| ARCP implemented and monitored by | Site Supervisor and employees on a daily basis via pre-start toolbox talks, visual observations by supervisor and employees, any required changes to working conditions will be documented in the toolbox talks. | | | | |

| | | | |
|----------------------------|-----------|--|------------|
| Internal ARCP reviewed by: | Saray Tin | | 27.10.2021 |
| Authorised: | Saray Tin | | 27.10.2021 |
| External ARCP reviewed by: | | | |
| Authorised: | | | |



4. Asbestos Removal Control Plan

Copy of the following documents to be readily available

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Copy of Notification to SafeWork NSW | <input checked="" type="checkbox"/> Copy of Asbestos Training Records | <input type="checkbox"/> Vacuum Logs (if applicable) |
| <input checked="" type="checkbox"/> Copy of Asbestos Removal Licence (AD212177) | <input checked="" type="checkbox"/> Copy of Employee Medical Certificates (chest x-ray to be within 24 months). | <input checked="" type="checkbox"/> Asbestos Register/Report |

Parties Notified ☒ SafeWork NSW ☒ Aitken ☒ Neighbouring properties ☐ Other:

Consultation with: ☒ ATS Supervisor ☒ ATS Wokers ☒ Aitken ☒ SafeWork NSW ☐ Other:

☒ Hygienist/Assessor to monitor works ► Contact Name Phone

Air monitoring Programme ► ☐ Personnel Air Monitoring ☒ Control Air Monitoring ☒ Clearance Monitoring ☒ Visual Clearance inspection ☐ N/A

Air monitoring details:

- Boundary monitoring during removal works
- Monitors to be set-up on a daily basis with membrane filters to be changed and analysed each day.
- Air monitoring reports to be submitted daily to all parties affected.

Identification of type of asbestos material to be removed and location (refer to audit/register and attached drawings for locations)

☒ Audit/Register ► Company Report Reference Date of report

| | | | | |
|--------------------|-------------------------|---|------------------|------------------------|
| Friable Asbestos ► | Type of ACM | Location (refer to audit/register for further details) | Condition | Approx Quantity |
| | Asbestos debris in soil | Building G - footprint | stable | ~600 tonnes |



5. Emergency planning (including COVID-19)

Emergency phone numbers

Is ATS the Principal Contractor on-site? ☒ No ► Adopt Principal Contractor's (Aitken) emergency procedures and COVID-19 Plan
☐ Yes ▼ Fill out details below at pre-start meeting.

Emergency site contact:
 (eg. Site Supervisor)

Stavros Stavrakakis

Number:

0403 211 324

Evacuation procedures including emergency assembly point to be discussed and documented. Site Supervisor's name and number should be added to your phone if not already done.

Name of nearest medical centre:

My Health Medical Centre

Address:

Shop 2/821-825 Pennant Hills Rd, Carlingford NSW 2118

Contact number:

02 9871 3088

Approx. travel time:

2 mins

FOR SERIOUS EMERGENCIES

DIAL 000

Tell the operator the location

Provide name and contact number

Stay on the line if safe to do so and provide any other information the operator may request

Emergency planning (Asbestos work area)

☒ Emergency inside asbestos work zone ►

General

1. Decontamination procedures can be waived in the event of an emergency (i.e. fire or life threatening situation)
2. When evacuating asbestos work zone, exit where safe to do so and follow the site emergency procedures
3. Hygienists are to be notified and their advice and direction sought in regards to the clean-up/decontamination of potential areas contaminated during emergency evacuation.



Emergency planning (Asbestos work)

☒ Emergency inside asbestos work zone ►

General

4. Decontamination procedures can be waived in the event of an emergency (i.e. fire or seriously injury)
5. If required, render outside assistance and escort to the injured worker. PPE to be made available before entering the work zone
6. When evacuating asbestos work zone, exit where safe to do so and follow the site emergency procedures
7. Hygienists are to be notified and their advice and direction sought in regards to the clean-up/decontamination of potential areas contaminated during emergency

☒ Air monitoring with elevated readings ►

Sampling results of more than 0.01 fibres/ml but less than or equal to 0.02 fibres/ml:

1. Investigate the cause
2. Implement controls to prevent exposure and prevent further release

More than 0.02 fibres/ml:

1. **Stop removal work**
2. **Notify SafeWork NSW** – this needs to be done as soon as possible by phone followed by a fax of the results accompanying a statement that work has stopped
3. **Investigate the cause** – this needs to include a thorough visual inspection of work processes and associated equipment in consultation with all employees involved with the removal work
4. **Implement controls to prevent exposure and further release** – this needs to include extending the isolated/barricaded area around the removal area as far as reasonably practicable (until airborne asbestos fibre levels are at or below 0.01 fibres/ml).
5. **Do not recommence asbestos removal work until further air monitoring is conducted** that indicates the airborne asbestos fibre levels are at or below 0.01 fibres/ml



Entering Asbestos Removal Areas and Site Requirements

Pre checks ►

☒ Employees clean shaven ☒ Fit checks conducted ☒ Full PPE to be worn as listed below

6. Minimum Personal Protective Equipment Requirements (within asbestos work area)

| PPE – Body | PPE – Head and face | PPE – Hands and feet | PPE – Respiratory | PPE – Other |
|--|--|---|--|-------------|
| <input checked="" type="checkbox"/> Type 5/6 Coveralls | <input checked="" type="checkbox"/> Hard Hat <input checked="" type="checkbox"/> Clear Safety Glasses <input checked="" type="checkbox"/> Hearing Protection | <input checked="" type="checkbox"/> Safety Boots <input checked="" type="checkbox"/> Boot covers or gumboots <input checked="" type="checkbox"/> Nitrile Gloves | <input checked="" type="checkbox"/> minimum P2 mask for plant operators <input checked="" type="checkbox"/> Half-face non-disposable respirator with a P3 filter (ground personnel) | |

7. Tools and Equipment to be used (mark or amend as required)

| Item | List inspections and maintenance requirements | Is a licence/ticket required to operate? | Is there a SOP attached to this SWMS? |
|--|---|---|---|
| <input checked="" type="checkbox"/> Vacuum cleaners | Daily before use | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Spray Bottle | | | |
| <input checked="" type="checkbox"/> Asbestos Waste Bag | | | |
| <input checked="" type="checkbox"/> 200um thick plastic | | | |
| <input checked="" type="checkbox"/> Decontamination unit | Daily before use | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Excavator | REFER TO OPERATORS SWMS | | |
| | | | |

| Item | List inspections and maintenance requirements | Is a licence/ticket required to operate? | Is there a SOP attached to this SWMS? |
|--|---|---|---|
| <input checked="" type="checkbox"/> Dust Pan | | | |
| <input checked="" type="checkbox"/> Pinch Bar | | | |
| <input checked="" type="checkbox"/> Duct Tape | | | |
| <input checked="" type="checkbox"/> Garden Hose | | | |
| <input checked="" type="checkbox"/> Platform ladders | Daily before use | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | | | |
| | | | |



8. Administrative controls (isolating asbestos removal work area) –

| | |
|---|--|
| Temporary protective barriers | Location(s) to be installed: |
| <input checked="" type="checkbox"/> Physical segregation (plastic sheeting) | Surrounding removal work area on temporary fencing |
| <input checked="" type="checkbox"/> Asbestos Barricade warning tape | Around the asbestos removal work zone on temporary fencing up to 10m away from works where practicable |
| Temporary danger signage around work area | Location(s) to be installed: |
| <input checked="" type="checkbox"/> Asbestos Removal in Progress | Outside the primary access/egress to work zone |
| <input checked="" type="checkbox"/> Do Not Enter | Outside the primary access/egress to work zone |

9. Controls and work practices to control asbestos airborne fibre hazards during removal (these controls are to be periodically monitored if left in place whilst no works are being conducted)

| | | |
|---|---|---|
| <input checked="" type="checkbox"/> Cross-contamination ► | <input checked="" type="checkbox"/> Erect work area screening (200um plastic onto temp fencing at least 10m away from work face) | <input checked="" type="checkbox"/> Personal decontamination when exiting work area |
| <input checked="" type="checkbox"/> Wet methods ► | <input checked="" type="checkbox"/> Mist spray water on material before and during removal | |
| <input checked="" type="checkbox"/> Encapsulation ► | <input checked="" type="checkbox"/> All vehicles transporting asbestos waste must be covered and leak-proof during transportation | <input checked="" type="checkbox"/> asbestos contaminated soils are to be wetted down |
| <input checked="" type="checkbox"/> Minimise Breakage ► | <input checked="" type="checkbox"/> Remove ACM as whole where possible | |

10. Controls of hazards

| | |
|---|---|
| <input checked="" type="checkbox"/> Unknown Services ► | <input checked="" type="checkbox"/> Identify any live services prior to works commencing (Dial before you dig to be conducted by site owner/operator) <input checked="" type="checkbox"/> Avoid spraying water on or near live electrical services |
| <input checked="" type="checkbox"/> Unauthorised persons in work area ► | <input checked="" type="checkbox"/> Ensure exclusion zone including signs and barricades are in place and check periodically throughout each shift |



11. Removal procedures

☒ ► Asbestos contaminated soil

1. Ensure air monitoring is in place before commencing removal works
2. Setup exclusion zone with barricade tape and warning signs (up to 10m if practicable)
3. Erect removal work area screening (200um plastic sheeting to temp fencing/windows)
4. Erect/install decontamination unit
5. Apply mist spray of water onto material that is required to be removed.
6. Excavate soil and load directly into waiting tipper truck.
7. **No trucks are to enter or exit the work area during the hours of 8.00am – 9.30am and 2.30pm - 4.00pm**
8. Check for any remaining material or debris within work area.
9. Obtain visual clearance inspection from hygienist upon completion of work.

12. Decontamination procedures

Personnel ☒ Wet/dry
Decontamination ►

- i. Asbestos removal area: Remove debris/outer layer coverall. Remove footwear and leave boots (upside down) inside the asbestos removal. Go to first decontamination chamber (i.e. dirty decontamination area)
- ii. Dirty decontamination area: wet wipe the outer layer of coveralls, gloves, boot covers and any possible exposed areas of skin. With the respirator still on, remove protective clothing and place in asbestos waste bags.
- iii. Clean decontamination area: Wet wipe all areas of skin and remove respirator. Thoroughly wet wipe hands, fingernails, face, head and respirator. Store respirator in a suitable container in the clean decontamination area. Move to the clean change area
- iv. Clean change area: Change into clean clothing.

☒ Tools and equipment ►

☒ Wet-wipe ☒ Bagged and sealed ☒ Wash (within work area) ☒ Dispose of as asbestos waste

☒ Non-disposable PPE & RPE ►

☒ Wet-wipe ☒ Bagged and sealed to be re-used in next work area

☒ Materials/items to be retained ►

☒ Wet-wipe ☒ Wash (within work area) ☒ Inspect work area before leaving

13. Method of Waste disposal

Asbestos waste including protective clothing and equipment ►

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> Double bagged, goose neck tied, taped | <input checked="" type="checkbox"/> Labelled | <input checked="" type="checkbox"/> Secured ► | <input checked="" type="checkbox"/> Within fenced area with signage |
| <input checked="" type="checkbox"/> Wrapped in 200um plastic, taped | | | <input checked="" type="checkbox"/> Within locked storage room |
| <input checked="" type="checkbox"/> Transporting vehicles to be covered and leak-proof. | | | |
| <input checked="" type="checkbox"/> Asbestos contaminated soil to be wetted down | | | |



Proposed EPA approved and
licensed landfill destination ►

☒ Other: To be provided by Aitken (Transporter)

14. Method of cleanup

Cleanup work area ►

☒ Removal of all visible debris

Post-work checks ►

☒ Visual inspection by ATS Asbestos Supervisor

☒ Visual inspection and Clearance certificate (Licensed Asbestos Assessor/Consultant)

15. ARCP Training Induction Register

The following persons (employees, sub contractors and others) signing below verify that they:

- understand the requirements and safe systems of work that have been established to carry out the works including the high risk construction work in a safe and healthy manner
- understand and will implement the risk controls outlined in this ARCP and the accompanying Safe Work Method Statement
- cease works and notify supervisor and/or management if the work is not being conducted in accordance with the Safe Work Method Statement
- understand that they have a Duty of Care to themselves and others
- have been inducted and understand the contents Safe Work Method Statement (SWMS) including the relevant references to Asbestos Removal Control Plan (ARCP) and Safe Operating Procedures (SOPs) associated with the works to be undertaken.

| | | | | | |
|----------------------|--|-----------|--|------|--|
| Name (Supervisor) | | Signature | | Date | |
| Name | | Signature | | Date | |
| Name | | Signature | | Date | |
| Name | | Signature | | Date | |
| Name | | Signature | | Date | |
| Name | | Signature | | Date | |
| Name | | Signature | | Date | |
| Name | | Signature | | Date | |