New Jersey Department of Health Consumer, Environmental and Occupational Health Service Environmental and Occupational Health Assessment Program P. O. Box 369, Trenton, NJ 08625-0369

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ASBESTOS MANAGEMENT PLAN PLAN TO INFORM Name of Responsible Governing Authority Name of Facility **Building Assessed** Describe the steps taken to inform maintenance personnel, building occupants, and/or legal guardians of children, regarding: Inspections 1. 2. Reinspections 3. Response Actions Post-Response Action Activities 4. Periodic Reinspections 5. Surveillance Activities that are Planned or In Progress.