

**YEARLY PROGRESS REPORT PACKAGE**

**AND**

**ADDITIONAL FORMS**



**January 2001**

**STATE OF TENNESSEE  
DEPARTMENT OF EDUCATION  
DIVISION OF POLICY AND LEGISLATION  
OPERATIONS AND FACILITIES**

# YEARLY PROGRESS REPORT INSTRUCTION GUIDE

This packet contains the forms necessary to complete the AHERA Yearly Progress Report. The Report should be completed every year and [SUBMITTED BY JULY 9](#) to:

**TENNESSEE DEPARTMENT OF EDUCATION  
DIVISION OF POLICY AND LEGISLATION  
OPERATIONS AND FACILITIES  
9th FLOOR, ANDREW JOHNSON TOWER  
710 JAMES ROBERTSON PARKWAY  
NASHVILLE, TN 37243-0375**

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**Phone:** (615) 532-1681  
**Email:** Deborah.Ö } ç!O ç È [ ç

This packet was developed to help Local Education Agencies (LEAs) meet the requirements of record keeping as outlined in AHERA. The LEA Designated Person is qualified to complete this packet.

## MINIMUM REQUIREMENTS

Completed copies of the following forms should be submitted to the State. The [original documents must be kept with your Management Plan](#).

1. Transmittal Sheet/AHERA Submittals (TAHERA 1.0)
2. Assurances Form (TAHERA 3.0)
3. Periodic Surveillance Report Form (TAHERA 9.0)
4. Dated Annual Notification to parents, teachers and LEA employees

**\*NOTE:** The Annual Progress Report Form (TAHERA 15.0) is no longer required.

Additional forms may also need to be submitted. A Checklist for Additional Forms (TAHERA 1.1) has been attached. Please use this checklist to determine the need for additional forms. The TAHERA 1.1 **does not** need to be returned to the State. The list below indicates the additional forms that have been included for your use. **If there have been no changes, you do not need to submit these forms.**

1. School Building List (TAHERA 5.0)
2. School Information/Certification Form (TAHERA 6.1A)
3. Abatement Action (TAHERA 10.0)
4. Employee Training Form (TAHERA 11.0)
5. Operations and Maintenance Activity (TAHERA 12.0)
6. Cleaning Record (TAHERA 13.0)
7. Fiber Release Episode (TAHERA 14.0)

# CHECKLIST FOR ADDITIONAL FORMS THAT MAY BE REQUIRED

(This form should not be returned to the State)

This checklist and attached forms will assist you in meeting the AHERA record keeping requirements. Keep the original forms with your Management Plan.

Send Copy to State	Not Needed	
		<p><b>1. School Building List (TAHERA 5.0)</b></p> <p>If all of the asbestos has been removed from an existing school/building the TAHERA 5.0 in the Management Plan should be revised. This should be done by marking a line through the "ACBM" column, placing an "X" in the "NO ACBM" column, initialing and dating the changes. This form must include all new school buildings and additions.</p>
		<p><b>2. School Information/Certification Form (TAHERA 6.1A)</b></p> <p>This form must be completed for all buildings and additions completed during the last year. Attach letter(s) from Architect, Engineer, or accredited Inspector if:</p> <p>a. If an existing building is acquired after 10/12/88, and is intended to be used as a new school or as a part of an existing school, an AHERA inspection shall be conducted <b>PRIOR</b> to the use of the building as a school building. <b>PLEASE NOTE THAT THE MANAGEMENT PLAN MUST BE SUBMITTED TO THIS OFFICE PRIOR TO USE OF THE BUILDING AS A SCHOOL FACILITY.</b></p> <p style="text-align: center;"><b>OR</b></p> <p>b. If a new building is constructed after 10/12/88, and is intended to be used as a school, an AHERA inspection shall be conducted <b>PRIOR</b> to the use of the building as a school building. The inspection and assessment of the building materials may be waived if an Architect, Project Engineer responsible for the construction of the building, or an accredited inspector signs a statement that (1) no ACM was specified as a building material in any construction document for the building or (2) to the best of his/her knowledge, no ACM was used as a building material in the building. If such a statement is obtained, the LEA shall submit a copy of the signed statement to the State and shall include the statement in the Management Plan for the school.</p>
		<p><b>3. Abatement Action (TAHERA 10.0)</b></p> <p>This form must be completed for any removal, enclosure, encapsulation or repair <u>greater</u> than 3 square or linear feet. Please attach a copy of the <a href="#">final clearance (TEM) air monitoring report</a>.</p>
		<p><b>4. Employee Training Form (TAHERA 11.0)</b></p> <p>This form must be completed for any new custodial and maintenance employees. Training must be completed within sixty (60) days of commencement of employment.</p>
		<p><b>5. Operations and Maintenance Activity (TAHERA 12.0)</b></p> <p>This form must be completed for any removal, enclosure, encapsulation or repair <u>less</u> than 3 square or linear feet.</p>
		<p><b>6. Cleaning Record (TAHERA 13.0)</b></p> <p>This form must be completed for any initial or additional cleaning as recommended by your Management Planner. Initial cleaning must be conducted for all schools containing friable asbestos.</p>
		<p><b>7. Fiber Release Episode Form (TAHERA 14.0)</b></p> <p>This form must be completed for the falling or dislodging of asbestos-containing materials in any quantity.</p>

**STATE OF TENNESSEE  
AHERA TRANSMITTAL/SUBMITTAL FORM**

**DATE:** \_\_\_\_\_

**LEA SYSTEM NAME:** \_\_\_\_\_

**LEA#:** \_\_\_\_\_

**ADDRESS:**

\_\_\_\_\_

\_\_\_\_\_

**DESIGNATED PERSON:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**PLEASE INDICATE TYPE OF DOCUMENT(S) BEING SUBMITTED  
BY PLACING AN "X" IN THE APPROPRIATE BOX.**

ORIGINAL SUBMISSION	CORRECTION/DEFICIENCY SUBMISSION	TYPE OF DOCUMENT
		MANAGEMENT PLAN
		YEARLY PROGRESS REPORT
		THREE YEAR REINSPECTION
		OTHER (Please Explain)

# ASSURANCES

SCHOOL YEAR ENDING \_\_\_\_\_

LEA SYSTEM NAME: \_\_\_\_\_ LEA NO. \_\_\_\_\_

This AHERA Management Plan was developed and has been submitted pursuant to the Asbestos Hazard Emergency Response Act of 1986, Public Law 99-519; and the United States Environment Protection Agency Rule: Asbestos Containing Material in Schools, 40 CFR Part 763, Subpart E.; and the undersigned does hereby certify that the Local Education Agency (LEA) indicated below has and will ensure the following:

1. The activities of any persons who perform inspections, re-inspections, and periodic surveillance, develop and update management plans, and develop and implement response actions, including operations and maintenance, are carried out in accordance with Part 763 and other Federal and State regulations and requirements.
2. All custodial and maintenance employees are properly trained as required in Part 763 and all other applicable Federal and State regulations (e.g., the Occupational Safety and Health Administration Asbestos Standard for Construction, the EPA Worker Protection Rule or applicable State regulations).
3. All workers and building occupants, and their legal guardians, are informed at least once each school year about inspections, response actions, and post-response action activities, including periodic re-inspection and surveillance activities, that are planned or in progress.
4. All short-term workers (e.g., telephone repair workers, utility workers, or exterminators) who may come in contact with asbestos in a school are provided information regarding the locations of asbestos-containing materials (ACM).
5. All warning labels are posted in accordance with Section 763.95.
6. All management plans are available for inspection and notification of such availability has been provided as specified in the AHERA regulations under Paragraph 763.93 (g).
7. The undersigned person designated by the LEA pursuant to Paragraph 763.84 (g) (1) has received adequate training as stipulated in Paragraph 763.84 (g) (2).
8. The LEA has and will consider whether any conflict of interest may arise from the interrelationship between the Management Planner and other accredited persons performing AHERA activities.

LEA DESIGNATED PERSON (please print): \_\_\_\_\_

LEA DESIGNATED PERSON'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

SUPERINTENDENT (please print): \_\_\_\_\_

SUPERINTENDENT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



# SCHOOL INFORMATION/CERTIFICATION FORM

LEA NAME: \_\_\_\_\_

LEA#: \_\_\_\_\_

## 1. BUILDING STATISTICS

Date Built	Area Name, Wing, Addition, etc.	Use	Total Area (Square Feet)
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## 2. STRUCTURAL SYSTEMS

### WALLS

- Masonry/Concrete
- Steel
- Wood
- Other

### FLOORS

- Wood
- Concrete
- Steel
- Other

### ROOF

- Wood
- Concrete
- Steel
- Other

### FOUNDATIONS

- Slab-on-grade
- Crawlspace
- Basement
- Other

NOTES: (Explain Other) \_\_\_\_\_

## 3. MECHANICAL SYSTEMS

### HEATING

- Central HVAC
- Radiator
- Wall Electric
- Other

### COOLING

- Central HVAC
- Wall Electric
- Window Units
- Other

NOTES: (Explain Other) \_\_\_\_\_

## 4. ARCHITECTURAL FINISHES

### CEILING

- Lathe and Plaster
- Gypsum Board
- Acoustical Finish
- Tile
- Other

### FLOORING

- Vinyl Tile
- Carpet
- Wood
- Unvarnished
- Other

### WALLS

- Lathe and Plaster
- Gypsum Board
- Masonry
- Wood/Paneling
- Other

NOTES: (Explain Other) \_\_\_\_\_

## 5. SUMMARY OF DOCUMENTS REVIEWED

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Floor Plans         | <input type="checkbox"/> Sections                    | <input type="checkbox"/> Past Abatement Projects       |
| <input type="checkbox"/> Mechanical Drawings | <input type="checkbox"/> As Built Drawings           | <input type="checkbox"/> Past Abatement Specifications |
| <input type="checkbox"/> Specifications      | <input type="checkbox"/> Sampling Reports (in-house) | <input type="checkbox"/> Past Surveys                  |
| <input type="checkbox"/> Finish Schedules    |  |  |

## 6. NEW SCHOOL BUILDINGS CONSTRUCTED AFTER OCTOBER 12, 1988

DATE OF BUILDING OCCUPANCY \_\_\_\_\_

I hereby affirm that no ACBM was specified as a building material in any construction document reviewed for the building or that to the best of my knowledge, no ACBM was used as a building material in the building.

NAME (Please print) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

REGISTRATION/ACCREDITATION # \_\_\_\_\_

TITLE \_\_\_\_\_

NOTE: Statement must be signed by the Architect, Project Engineer, or an Accredited Inspector. Attach accreditation certificate for accredited inspector.





LEA NAME: \_\_\_\_\_

LEA#: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

SCHOOL #: \_\_\_\_\_

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## ABATEMENT ACTION

Use this form to document removal, enclosure, and encapsulation or repair materials greater than 3 Square or Linear Feet of Asbestos Containing Building Materials (ACBM). Provide one- (1) form for every abatement action.

1. Provide or attach detailed written description of abatement action.

Starting Date: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Original Management Plan Homogeneous Area No. \_\_\_\_\_  
(Attach TAHERA 6.3 to indicate location of abatement action)

2. Name of Abatement Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Accreditation #/Agency: \_\_\_\_\_

3. Name of Abatement Designer: \_\_\_\_\_

Address: \_\_\_\_\_

Accreditation #/Agency: \_\_\_\_\_

4. Air Monitoring Laboratory: \_\_\_\_\_

Address: \_\_\_\_\_

Accreditation #/Agency: \_\_\_\_\_

5. Name of Waste Disposal Site: \_\_\_\_\_

Address: \_\_\_\_\_

**6. Attach Air Monitoring Report which provides the following information:**

- a. Air Monitoring FINAL Clearance Report (TEM)
- b. Location of Samples and Date Collected
- c. General Description of Analyzing Method Used
- d. Name of Analyst and Signature
- e. Result of Analyses
- f. Laboratory Accreditation Statement (if applicable)

DATE: \_\_\_\_\_

LEA NAME: \_\_\_\_\_

LEA #: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

SCHOOL #: \_\_\_\_\_

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## OPERATIONS AND MAINTENANCE ACTIVITY

Use this form to document removal, enclosure, encapsulation or repair of materials LESS THAN 3 SQUARE OR LINEAR FEET of Asbestos Containing Building Material (ACBM).

1. Description of location(s) of Operation and Maintenance (O&M), fiber release episodes, and cleaning activities.

2. Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

3. Describe preventative methods to limit fiber release and to protect workers and occupants:

4. Cleaning methods used:

5. If ACBM is removed, name and location of storage or disposal site:

LEA DESIGNATED PERSON: \_\_\_\_\_

LEA DESIGNATED PERSON SIGNATURE: \_\_\_\_\_

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DATE: \_\_\_\_\_

LEA NAME: \_\_\_\_\_

LEA #: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

SCHOOL #: \_\_\_\_\_

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## CLEANING RECORD

Use this form to document initial and additional cleaning as recommended by your Management Plan. Provide one – (1) form for each activity.

1. Location cleaned:

2. Cleaning methods used (pursuant to 40 CFR 763.91 [a]):

3. Names of persons performing cleaning and training dates:

4. Date cleaning was performed:

LEA DESIGNATED PERSON: \_\_\_\_\_

LEA DESIGNATED PERSON SIGNATURE: \_\_\_\_\_

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DATE: \_\_\_\_\_

LEA NAME: \_\_\_\_\_

LEA #: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

SCHOOL #: \_\_\_\_\_

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## FIBER RELEASE EPISODE

Use this form to document FIBER RELEASES caused by falling or dislodging Asbestos Containing Building Materials. Provide one – (1) form for each release.

1. Describe fiber release episode including location, type of ACBM, method of repair, preventative measure or response action taken.

2. Date of Fiber Release Episode: \_\_\_\_\_

3. Names of person(s) performing any work described above:

4. If ACBM is removed, name and location of storage or disposal site:

LEA DESIGNATED PERSON: \_\_\_\_\_

LEA DESIGNATED PERSON SIGNATURE: \_\_\_\_\_

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DATE: \_\_\_\_\_