Permit application



For official use only

Send the application to arbetsmiljoverket@av.se or Arbetsmiljöverket, Box 9082, 171 09 Solna.

Machining or treatment of asbestos or containing asbestos in accordance with chapter 3, 6 § AFS 2023:13.

Details of company

Company	Company registration number
Address	
Postal address	
Contact person	Telephone number (include area code) Mobile phone number

Details of workplace where the work is to be carried out

Address	
Work method	
Scope	
Type of material containing asbestos that will be handled	
Estimated amount of asbestos (approximate details m ³ , kg, m ² insulation or other approximate amount)	

How the waste will be transported and disposed of

Waste site	Haulier (normally a transportation permit from the Count Administrative Board)

Times

Requested starting date

Requested finishing date

The following is attached:

Training certificates for those who will managing the work

Training certificates for those who will be carrying out the work

Certificates of fitness for duty for those who will be carrying out the work, see chapter 3, 44 § AFS 2023:13.

Handling and saftey instructions (date and company in question must be included in the instructions)

A statement from the local safety delegate or, failing that, a statement from the regional safety delegate