Supplier Letterhead

**ASBESTOS ASSURANCE PER SHIPMENT**

Importer Name: …………………………………………..

Invoice Number: ………………………………………….

Container Number: ………………………………………

ZERO ASBESTOS ASSURANCE

This document serves as a declaration and confirmation from the supplier / manufacturer (……… Insert name …..… ) that no Asbestos or materials or components containing asbestos have been used the manufacture of any of the company’s product lines.

Asbestos includes all fibrous forms of Asbestos and includes mineral silicate from the:

Serpentine Group

Chrysotile asbestos (white Asbestos)

Amphibole Group

Actinolite Asbestos

Amosite asbestos (brown and grey Asbestos)

Anthophyllite Asbestos

Crocidolite (blue Asbestos)

Temolite Asbestos

Asbestos containing material covers all friable and non-friable Asbestos.

Print Name ……………………………………………………………………………….

Position Held ……………………………………………………………………………..

Date ………………………………………………………………………………………..

Signature ………………………………………………………………………………….