

Industrial Hygiene Consulting Services Statement of Work (SOW)

This document should be given to the consultant each time identified services are requested.

Report Information

Date	Date report required	Property number
Church representative		Consultant

Property Information

Pursuant to the master services agreement (the "Agreement") between _____ ("Company") and The Church of Jesus Christ of Latter-day Saints (the "Church"), Company is hereby authorized to initiate the consulting services described herein, compliant with federal, state, and local regulations, for the property described below ("Property").

Property description (to be completed by Church representative)	Address of property
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Contact Information

Property access contact name	Email	Phone
Architect name	Email	Phone
General contractor name	Email	Phone

Project Information

Describe building	Building construction date and renovation dates (describe):
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Project type

- Renovation Full-building demolition Other

If a renovation, describe the specific locations (floors, rooms, and so on) that will be affected. Include architectural drawings of the renovation, if available.

Work or testing

- Asbestos survey and management plan
- Lead-containing paint survey (buildings constructed before 1978)
- Hazardous materials survey (hazardous materials need to be removed before renovation or demolition)
- Microbiological (mold investigation and testing)
- Radon testing
- Indoor air quality investigation and testing
- Lead in drinking water testing
- Other

Describe the scope of the work to be completed

Building materials or components that could be impacted:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Ceilings, including surfacing | <input type="checkbox"/> Doors | <input type="checkbox"/> Piping, plumbing, and sinks | <input type="checkbox"/> Exterior siding or surfacing |
| <input type="checkbox"/> Walls, including surfacing | <input type="checkbox"/> Electricity and lighting | <input type="checkbox"/> Cooling towers | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Floors | <input type="checkbox"/> HVAC, including ducting | <input type="checkbox"/> Elevator equipment | <input type="checkbox"/> Other |
| <input type="checkbox"/> Windows, including caulks and sealants | <input type="checkbox"/> Boilers, tanks, or coolers | | |

Industrial Hygiene Consulting Services Statement of Work (SOW)—continued

Cost Information

<i>Cost Estimate</i> (To be completed by contractor)	<i>Amount</i>	<i>Comments or Additional Information</i>
Cost estimate		
Additional work or testing		
Total cost		

Authorization

<i>Church Consent</i>	<i>Contractor Consent</i>
Signature	Signature
Name (printed)	Name (printed)
Job title	Job title
Date	Date