3 Year Reinspection	Date of Reinspection:	
School:	Inspector Name:	
Address:	Inspector Signature:	License #:

Material	Location (Homogeneous Area)	QTY	Friable	Phys Assess Category	Assumed ACM	Sample Date ACM Y or N	Recommendation	Amount/Location of Damage; Type of Damage	Schedule Begin/Complete	Special Cleaning