



Mercury Remediation Survey

Date: _____

Project description

COMPANY NAME :	_____
ADDRESS :	_____ _____

Contact person:	_____
Position:	_____
Location:	_____

Vessel/Process Unit Information

Dimensions:	_____
Internal lining (Max. Temp. rating):	_____
Metallurgy:	_____
Diagram:	_____

Forms of mercury identified:	Elemental :	ug/scm
	Sulphides :	ug/scm
	Inorganic :	ug/scm
	Organic :	ug/scm

Lab analysis (attach results):	_____
Media contaminated:	_____
Location of source contamination:	_____
Last remediation:	_____
Product used & by whom?	_____
Results and validated by whom?	_____
When is the job to be conducted:	_____

How do you propose to monitor remediation progress and completion?

By who?	
Sampling technique:	
Analytical/verification technique:	
Accessibility:	
Obstructions:	

Are engineering drawings available

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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Can we have a copy?

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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Entrance point

Add entrance points to vessel diagram above

Are other forms of decontamination required?

Gas-freeing?	<input type="checkbox"/>	Sludge or scale removal?	<input type="checkbox"/>
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Acceptable gas levels

LEL	
H ₂ S	
CO	
Benz	
Others	

Waste disposal site



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Notes
