

ASBESTOS EXPOSURE QUESTIONNAIRE

GMB is currently undertaking a process to determine asbestos exposure amongst members. The issue of asbestos exposure in the workplace is of great interest to many of our members. Those occupations which are categorised as 'at risk' include gas fitters, plumbers, and building maintenance workers. Previous questionnaires have uncovered an obvious gap in members' past exposure experiences. This may be because the enterprise or employer no longer exists, or the premises may have been since demolished.

The purpose of this questionnaire is to collect information on past employment records where there may have been exposure to asbestos in order to create a database of information and factual records. Therefore, it is important that if you suspect that you have been exposed to asbestos in the past, could you please complete this form and return it to the address located at the end of this Questionnaire.

It is important to remember that not everyone who has been exposed to asbestos develops an asbestos related disease. However, for those who do develop disease, the effects can be devastating. By collecting information now on past employment history for all those members who suspect that they may have been exposed to asbestos, GMB aims to assist any future claims for compensation. The information you provide will help not only you but possibly many other members.

We would ask all members who suspect that they may have been exposed to asbestos, particularly those working as ladders, plumbers, fitters, building maintenance workers, caretakers, riggers and heavy industry workers to complete the questionnaire.

Thank you for your assistance.

1 Surname		
2 Forename(s)		
3 Home address		
4 Home telephone number		
5 Please give your GMB membership number		
6 Are you a current member of GMB? Please tick	Yes	No
7 Have you been exposed to asbestos? Please tick	Yes	No



8 Please give details of where and when you were exposed to asbestos.

Name and address of employer and address of site/location	Dates of employment		Brief description of how you were exposed to asbestos
	From	To	

Please provide additional information on a separate sheet of paper

9 Please give the names and addresses of any workmates or witnesses who can confirm how you were exposed to asbestos.

Name	Address

10 Have you ever been told you may be suffering from any asbestos related disease? Please tick	Yes	No
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11 If yes, have you been told which of the following you are suffering from? Please tick

Mesothelioma	<input type="checkbox"/>	Pleural Plaques	<input type="checkbox"/>	Pleural Thickening	<input type="checkbox"/>	Asbestosis	<input type="checkbox"/>	Lung Cancer	<input type="checkbox"/>
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12 When were you diagnosed?	
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13 Have you ever applied to the DSS for benefit for asbestos related disease? Please tick	Yes	No
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14 If yes, when did you claim?	
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15 Have you ever previously obtained legal advice in connection with your asbestos exposure? If yes, give the name and address of the solicitors.	
Yes	No

I confirm and consent to this information being used by the union and others for the purpose of assisting personal injury claims.

I confirm the content of this statement is true.

Signed:

Date:

For too many GMB members, being diagnosed as suffering from an asbestos related disease or even Mesothelioma (a terminal cancer) comes as a great shock for them and a greater shock for their families. The diseases can take up to 30 years before they become evident, leaving little time to prove who was responsible for the exposure to the killer dust. By taking part in this exercise, you may be helping to save time and quicken a claim in the unfortunate chance of suffering from exposure to asbestos.

PLEASE COMPLETE AND RETURN TO:

'ASBESTOS' GMB Questionnaire, Thompsons Solicitors, Acresfield, 8 Exchange Street, Manchester, M2 7HA