

Manville Personal Injury Settlement Trust
AFFIDAVIT
Of Significant Occupational Exposure
For Deceased Injured Party

I, _____, being duly sworn,
depose and say:

1. I have personal knowledge regarding how _____
(the "Injured Party") was exposed to asbestos.

2. I have this personal knowledge because I was the Injured Party's (*circle one*):

(a) co-worker, (b) family member (c) other. (*Explain your relationship to Injured Party and how you know about his or her exposure to asbestos; use additional paper if necessary.*)

3. The Injured Party had Significant Occupational Exposure to asbestos. I understand the phrase "on a regular basis" as used here means every workday for a substantial part of the workday. I state that for at least five years' time, out of all the years the Injured Party worked, Injured Party (*write your initials indicating one or more of the following*):

- _____ a. personally handled raw asbestos fibers on a regular basis
- _____ b. personally fabricated asbestos-containing products so that in the fabrication process Injured Party was exposed on a regular basis to raw asbestos fibers
- _____ c. personally altered, repaired or otherwise worked with an asbestos-containing product such that Injured Party was exposed on a regular basis to asbestos fibers
- _____ d. was employed in an industry and occupation such that Injured Party worked on a regular basis within ten to twenty feet of workers engaged in the activities described in (a), (b) and/or (c)

4. The workplace exposure to asbestos I described in Paragraph 3 above **was not** simply working at a factory or other facility where pipes or other parts of the building or machinery were insulated with asbestos that was altered, repaired, or otherwise worked with **once in a while**. Either Injured Party or other workers within ten to twenty feet of him or her handled raw asbestos or fabricated, altered, repaired or otherwise worked with

asbestos-containing products *every workday for a substantial part of the workday for a total of at least five years all together.*

The workplace(s) where Injured Party had Significant Occupational Exposure to asbestos, and the jobs Injured Party performed there were:

Start Month/Year	End Month/Year	Occupation	Facility	City, State

5. If the only part of Paragraph 3 that I initialed was 3(d), because Injured Party did not personally work with raw asbestos or asbestos-containing products on a regular basis but worked within ten to twenty feet of workers who did, the tasks those workers performed on a regular basis were:

_____.

6. I understand that trust funds that have a limited amount of money to pay workers who were injured by asbestos may rely on this affidavit and other required submissions in deciding how much money to pay to settle Injured Party's asbestos claim. Under penalty of perjury, by signing this I certify that all of the representations I make in this affidavit are true and accurate.

7. (any additional comments or statements; use additional paper if necessary):

_____.

Signature

State of _____;

County of _____;

Subscribed and sworn to this _____ day of _____, 20____, before me, the undersigned, a notary public in and for the county and state written above, and as witnessed by my hand and official seal.

My commission expires the _____ day of _____, 20_____.

Notary Signature