Clean Air Testing Labs, Inc. 1111 Steele Blvd, Baldwin, New York 11510 Tel / Fax: 516-546-2640 Web: cleanairtesting.com

TEM	/PCM D/	ATA SHE	ET	Project Name:						Work Area:				Cat Tech:				
Client: Project Address														Lab Analyst:				
Sample Date: MFG:						Lot #:					Analysis Date:				Lab Director:			
Analytical Procedure: NIOSH 7400 NIOSH 7						402 TEM					SCOPE: NIK: OLY: Make					Job #:		
Phase (Circle One): Background Pre-Abate						ment		During	Abate	ment F	Final Clearance Personal			Put Map Of Sample On Back (as applicable)		# Of Samples:		
Phase: Date						eceived:				Rotometer #:				Filter Size:				
Sam #	Lab #	Pump #	Sampl	e Location	ific)	Start Time			Total Time (min)	Start Rate	Stop Rate	Avg. Rate	Volume (L)		Conc. s/mm2	Fiber Count Fibers/cc		
Comments:																		
Technician's Name:								Signature:				Dat		Date:	ate:		Time:	
Reliquished By: Date:									Recei	ived By:				Date:		Time:		
Reliquished By:							Date: Rece			eived By:				Analyst:		Date:		