

2.5 Other Ventilation System Visual Inspection Form

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Note: complete this form only if a ventilation system is located that is not described on forms 2.1 – 2.4

Other Ventilation System Identification:

Location:

Area Served:

Associated mechanical room: clean ☐ Y ☐ N dry ☐ Y ☐ N stored chemicals/refuse ☐ Y ☐ N

| System Components<br>[NOTE: if component is located but is inaccessible (I) please indicate in last column] | Surface<br>Dust/<br>Debris<br>Present? | WTC<br>Dust<br>Present? | Component<br>inaccessible? |
|-------------------------------------------------------------------------------------------------------------|----------------------------------------|-------------------------|----------------------------|
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Other Information:

General impression (indicate recommendations for cleaning based on finding of WTC dust):

KEY: NP = not present; NF = not found; I = inaccessible; U = unknown