

112

Riverpoint, Inc.

7 Hillside Avenue, Suite 100 • New Rochelle • New York 10801-1608

(014) 632-1552 Telephone

(014) 632-1558 Facsimile

PCM Air Sample Analysis and Calibration Form

Job Number: 101171

Job Name: DEP WTC

Work Area: N/A

Contractor: N/A

Shift Hours: N/A

F = Final Clearance

P = Pre-Abatement

I = Inside Work Area

O = Outside Work Area

A = Ambient, Outside Building

Page 1 of 4

Date: 10/20/01

Field Technician: Boron Grzegorz

Project Manager: B. Elvenaes

Number of Workers: N/A

Sample Number	Location and Activity	Sample Type	Pump Number	Initial Flow Rate (l/min)	Final Flow Rate (l/min)	Average Flow Rate (l/min)	Time On	Time Off	Total Time (Minutes)	Total Volume (liters)	Filter/c	NIOSH 7400
01	Park Pl & Church	A	G-29	15	15	15	09:00	09:45	45			
02	Park Pl & Greenwich	A	G-29	15	14	14.5	10:51	11:36	45			
03	Murray & Church	A	G-7	15	15	15	08:55	09:40	45			
04	Murray & Greenwich	A	G-7	15	14	14.5	10:55	11:40	45			
05	Fulton & Church	A	G-29	15	15	15	10:55	10:40	45			
20	Wesley & W. Broadway	A	G-7	15	14	14.5	10:00	10:45	45			

Calibration Method: Rotameter

Signature: Boron Grzegorz

Chain of Custody

Released by: Boron Grzegorz	Date: 10/20/01	Accepted by: M. PALUL	Date: 10/20/01
Signature: Boron Grzegorz	Time: 1400	Signature: [Signature]	Time: 1400
Released by: _____	Date: _____	Accepted by: _____	Date: _____
Signature: _____	Time: _____	Signature: _____	Time: _____
Released by: _____	Date: _____	Accepted by: _____	Date: _____
Signature: _____	Time: _____	Signature: _____	Time: _____

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Job Number: 101 171
 Job Name: DEP WTC
 Work Area: N/A
 Contractor: N/A
 Shift Hours: N/A

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I = Inside Work Area

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Page 2 of 4Date: 10-20-2001Field Technician: A. DE ROBERTISProject Manager: B. ELVENAESNumber of Workers: N/A

Sample Number	Location and Activity	Sample Type	Pump Number	Initial Flow Rate(l/m)	Final Flow Rate(l/m)	Average Flow Rate(l/m)	Time On	Time Off	Total Time (Minutes)	Total Volume (liters)	Fibers/cc Limit of Detection	NIOSH 7400
10-20 6	WARREN / NORTH END	A	N/A	15.0	15.0	15.0	1049	1134	45			
10-20 7	WEST STREET / WARREN	A	N/A	15.0	14.5	14.75	1148	1233	45			
10-20 14	PARK PL / RIVER TERRACE	A	N/A	15.0	15.0	15.0	0933	1018	45			
10-20 15	RIVER TERRACE / CHAMBER	A	N/A	15.0	15.0	15.0	0942	1027	45			
10-20 16	RIVER TERRACE / WARREN	A	657	15.0	14.5	14.75	0936	1021	45			
10-20 17	NORTH END / PARK PL WEST	A	657	15.0	15.0	15.0	1047	1132	45			
10-20 18	VESEY / RIVER TERRACE	A	N/A	15.0	14.0	14.5	0841	0926	45			

Calibration Method: ROTAMETERSignature: A. DeRobertis

Chain of Custody

Released by: <u>A. DE ROBERTIS</u>	Date: <u>10-20-2001</u>	Accepted by: <u>M. JALIL</u>	Date: <u>10-20-2001</u>
Signature: <u>A. DeRobertis</u>	Time: <u>1400</u>	Signature: <u>M. JALIL</u>	Time: <u>1400</u>
Released by: _____	Date: _____	Accepted by: _____	Date: _____
Signature: _____	Time: _____	Signature: _____	Time: _____
Released by: _____	Date: _____	Accepted by: _____	Date: _____
Signature: _____	Time: _____	Signature: _____	Time: _____

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PCM Air Sample Analysis and Calibration Form

Job Number: 101171

F • Final Clearance

Page 3 of 4

Job Name: DEP WTC

P • Pre-Abatement

Date: 10-20-2001

Work Area: N/A

I • Inside Work Area

Field Technician: M. PAWLIL

Contractor: N/A

O • Outside Work Area

Project Manager: B. Elvenaes

Shift Hours: N/A

A • Ambient, Outside Building

Number of Workers: N/A

Sample Number	Location and Activity	Sample Type	Pump Number	Initial Flow Rate(l/m)	Final Flow Rate(l/m)	Average Flow Rate(l/m)	Time On	Time Off	Total Time (Minutes)	Total Volume (liters)	Filters/sec	Limit of Detection	NIOSH 7400
191020	TRINITY PL. / THAMES	A	101	15.0	14.5	14.75	1017	1102	45				
101020	WEST 2 ALBANY	A	101	15.0	14.5	14.75	1109	1154	45				

Calibration Method: Rotameter

Signature: M. Pawlil

Chain of Custody

Released by: <u>M. PAWLIL</u>	Date: <u>10-20-2001</u>	Accepted by: <u>M. PAWLIL</u>	Date: <u>10-20-2001</u>
Signature: <u>[Signature]</u>	Time: <u>1400</u>	Signature: <u>[Signature]</u>	Time: <u>1400</u>
Released by: _____	Date: _____	Accepted by: _____	Date: _____
Signature: _____	Time: _____	Signature: _____	Time: _____
Released by: _____	Date: _____	Accepted by: _____	Date: _____
Signature: _____	Time: _____	Signature: _____	Time: _____

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Date: 10 20 01

Field Technician: Vladimir Pankov

Project Manager: Binger Elvenaes

Number of Workers:

Sample Number	Location and Activity	Sample Type	Pump Number	Initial Flow Rate(l/m)	Final Flow Rate(l/m)	Average Flow Rate(l/m)	Time On	Time Off	Total Time (Minutes)	Total Volume (liters)	Fibers/cc Limit of Detection	NIOSH 7400
12 10 20	3 rd place/West end/Water side	A	G 26	15	15	15	8:20	9:05	45			
13 10 20	West end of West Thames	A	G 26	15	14.6	14.8	9:09	9:54	45			
11 10 20	Rector place by park	A	G 26	14.8	14.6	14.7	10:00	10:46	46			
9 10 20	South END AV & Albany	A	G 26	14.8	14.5	14.65	10:50	11:37	47			
8 10 20	Gateway plaza	A	G 26	15	14.5	14.75	11:40	12:25	45			

Calibration Method: Rotometer

Signature: Vladimir Pankov

Chain of Custody

Released by: <u>Vladimir Pankov</u>	Date: <u>10 20 01</u>	Accepted by: <u>M. J. L. (116)</u>	Date: <u>10 20 20 01</u>
Signature: <u>Vladimir Pankov</u>	Time: <u>1400</u>	Signature: <u>M. J. L.</u>	Time: <u>1400</u>
Released by: <u> </u>	Date: <u> </u>	Accepted by: <u> </u>	Date: <u> </u>
Signature: <u> </u>	Time: <u> </u>	Signature: <u> </u>	Time: <u> </u>
Released by: <u> </u>	Date: <u> </u>	Accepted by: <u> </u>	Date: <u> </u>
Signature: <u> </u>	Time: <u> </u>	Signature: <u> </u>	Time: <u> </u>