

TAYLOR ENVIRONMENTAL GROUP, INC.
130 JERICHO TPKE., FLORAL PARK, NY 11001

6 HRS TAT

20906

516-358-2955
Fax 516-358-1780

LEAD SAMPLING DATA AND CHAIN OF CUSTODY DOCUMENT

CLIENT NAME/ADDRESS NYC ECA		CONTACT: HAMID SAUOJ.		SAMPLER (SIGNATURE) <i>Carlos Jofat</i>		DATE 7-19-02		TIME		SAMPLE(S) SEALED ☒ YES / NO	
PROJECT LOCATION: STUYVESANT H.S.		PROJECT # M477-15217 / 29881		SAMPLER NAME (PRINT) CARLOS JOFAT						CORRECT CONTAINER(S) ☒ YES / NO	
				MATRIX (CIRCLE ONE): ☒ WIPE ☐ PAINT ☐ SOIL ☐ OTHER _____							
SAMPLE INFORMATION:				AREA (FT ²)		SURFACE MATERIAL				LAB RESULT	
LABORATORY #	SAMPLE #	LOCATION				WOOD	METAL	BRICK	OTHER		
	LW-01	ROOM # 902. LEFT UNIT VENT - REAR.		1			✓			≤ 9.0 <i>μg</i> ft ²	
	LW-02	ROOM # 902 RIGHT UNIT VENT → REAR.		1			✓			≤ 9.0	
	LW-03	ROOM # 804 LEFT UNIT VENT → REAR		1			✓			≤ 9.0	
	LW-04	ROOM # 804 RIGHT UNIT VENT → REAR.		1			✓			≤ 9.0	
	LW-05	ROOM # 815 LEFT UNIT VENT → REAR		1			✓			≤ 9.0	
	LW-06	ROOM # 815 RIGHT UNIT VENT → REAR.		1			✓			≤ 9.0	
	LW-07	ROOM # 827 LEFT Unit Vent → REAR		1			✓			≤ 9.0	
	LW-08	ROOM # 827 Center Unit Vent → REAR		1			✓			≤ 9.0	
				TURNAROUND REQUIRED: NORMAL ☐ STAT ☐ BY 1 / 1				COMMENTS / INSTRUCTIONS NIOSH Method 7082			
RELINQUISHED BY (SIGNATURE) <i>Carlos Jofat</i>		DATE 7-19-02 TIME 1600		PRINTED NAME CARLOS JOFAT		RECEIVED BY (SIGNATURE) <i>Alv 07/19</i>		DATE		PRINTED NAME	
RELINQUISHED BY (SIGNATURE) <i>S. Francis</i>		DATE 7-19-02 TIME 500pm		PRINTED NAME S. FRANCIS		RECEIVED BY LAB (SIGNATURE) <i>Car</i>		DATE		PRINTED NAME	

Fax results to (718) 491-1111 and also to the office.

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CLIENT NAME/ADDRESS			CONTACT:		SAMPLER (SIGNATURE)		DATE		TIME		SAMPLE(S) SEALED ☒ YES ☐ NO	
NYC SCA			HAHID SAUOJ.		CARLOS JOFAT						CORRECT CONTAINER(S) ☒ YES ☐ NO	
PROJECT LOCATION:			PROJECT #		MATRIX (CIRCLE ONE): ☒ WIPE ☐ PAINT ☐ SOIL ☐ OTHER							
STUYVESANT H.S.			M477-15217 / 29881									
SAMPLE INFORMATION:					AREA (FT ²)		SURFACE MATERIAL				LAB RESULT	
LABORATORY #	SAMPLE #	LOCATION				WOOD	METAL	BRICK	OTHER			
	LW-09.	Room # 827. Right Unit Vent → REAR.			L		✓			11.3		
	FB-1	FIELD BLANK			—	—	—	—	—	≤ 9.0		
	FB-2	FIELD BLANK			—	—	—	—	—	≤ 9.0		
					TURNAROUND REQUIRED:				COMMENTS / INSTRUCTIONS			
					NORMAL ☐ STAT ☐ BY 1/1				NIOSH Method 7082			
RELINQUISHED BY (SIGNATURE)		DATE 7-19-02		PRINTED NAME		RECEIVED BY (SIGNATURE)		DATE		PRINTED NAME		
CARLOS JOFAT		TIME 1000		CARLOS JOFAT		ALC 07/19 02						
RELINQUISHED BY (SIGNATURE)		DATE 7-19-02		PRINTED NAME		RECEIVED BY LAB (SIGNATURE)		DATE		PRINTED NAME		
[Signature]		TIME 500 PM		S. Francis		[Signature]						

WHITE - OFFICE / YELLOW - LAB / PINK - CLIENT