

&
CHAIN OF CUSTODY FORM

PROJECT INFORMATION

1. PROJECT NAME: <u>WTC</u>		2. ADDRESS:	3. BORO: <u>Man</u>
4. DATE: <u>9-24-01</u>	5. AIR MONITOR: <u>A. Soloki</u>	6. (a) Background: ___ (b) OSHA: ___ (c) Pre-Abate: ___ (d) Post-Abate: ___ (e) Abatement: ___ (f) Ambient: <u>X</u> (g) PCM (0.8µMCE) ___ (h) TEM (0.45µMCE) ___	

AIR SAMPLING DATA

ROTOMETER No:

SAMPLING TIME

FLOW RATE OF PUMP (L/min)

7. Sample ID	8. Pump No:	9. Sample Location	10. Start Time	End Time	Total Mins	11. Start Flow	End Flow	Avg. Flow	12. Total Vol (L)	13. Fiber Conc.
302/002		RIVER TERRACE / Park Pl.	1:05	1:45	40	15	15	15	600	40008
302/003		RIVER TERRACE / CHAMBERS St	1:50	2:30	40	15	15	15	600	40008

CHAIN OF CUSTODY

Turnaround Time: 2hrs ___ 6hrs ___ 24hrs ___ 48hrs ___ 72hrs ___

14. Relinquished by	15. Received by	16. Date	17. Time	18. Analysis Requested
A - Soloki	Grog Frickman	9/24/01	7:00	NIOSH 7400: <u>X</u>
A. Soloki	A. Soloki		AP	AHERA: _____
				OTHER: _____

New York City Department of Environmental Protection
Bureau of Air, Noise & Hazardous Materials
Division of Emergency Response and Technical Assessment
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