NYC-WTC_00024512

SUBJECT TO PROTECTIVE ORDER NO. 2, SEPT. 2008

CONFIDENTIAL,

CITY_21MC100_00342425

NYC 9/11 Public Portal Document

FIELD DATA COLLECTION/CHAIN-OF-CUSTODY RECORD : ASBESTOS ANALYSES ONLY **Sampling Date:**

OFFICE OF EMERGENCY PREPAREDNESS-USPHS **C/0: NEW YORK DEPARTMENT OF HEALTH** **253 BROADWAY, 12TH FLOOR, NEW YORK, NY 10007** **PH (212) 676-6323 FAX (212) 442-9316**	**PROJECT REFERENCE NUMBER:** **USPHS MISSION #12: RESIDENTIAL SAMPLING NEW YORK CITY** **SAMPLING BLDG/LOCATION**	**ANALYSIS REQUESTED** *(INVESTIGATOR: YOU MUST SPECIFY EITHER THE METHOD OR THE ANALYTE(S) FOR EACH*

TYPE OF SURFACE*
H = HARD SURFACE
CDP = CARPET, DEEP PILE
CS = CARPET, SHAG
CSP = CARPET, SHORT PILE
CTR = CARPET, THROW RUG

ATTENTION LABORATORY: SEND RESULTS TO:

VIA: (Please check)
[X] Mail Originals to: **ATTN: USPHS MISSION #12 RESIDENTIAL SAMPLING** **PH: (212) 442-6792**
CAPT Sven Rodenbeck, Mail Stop E-32, 1600 Clifton Road, NE, Atlanta, GA 30333
[X] E-MAIL to: **LXW2@cdc.gov (Ms. Lynn Wilder, CIH)**
[X] Fax to: **ATTN: CAPT Sven Rodenbeck at (404) 498-0073 *and* USPHS Mission #12 at (212)442-9316**

SAMPLING SITE	SAMPLE TYPE	SAMPLER TYPE 25-mm Cassette Pre-Sampling Flow	Post-Sampling Flow	SAMPLE NUMBER	START TIME	STOP TIME	TYPE OF SURFACE*	Airborne Asbestos fibers by PCM (NIOSH 7400) IF >0.01f/cc, forward sample for TEM (NIOSH 7402)	Surface dust Asbestos Fibers by PLM (NIOSH 9002) IF <1%, forward sample for TEM (NY 198.4)	ADDITIONAL INFORMATION REGARDING SAMPLE
Outdoors	Airborne Asbestos	LPM	LPM	[R]A-O-				X		Location:
	Settled Dust Bulk			[R]SA-O-					X	Area: cm^2
Common Area	Airborne Asbestos	LPM	LPM	[R])A-C-				X		Location:
	Vacuum Surface Dust			[R]VA-C-					X	Area vacuumed: M^2
Residence 1	Airborne Asbestos	LPM	LPM	[R]A-R1-				X		Floor: Apt:
	Vacuum Surface Dust			[R]VA-R1-					X	Area vacuumed: M^2
Residence 2	Airborne Asbestos	LPM	LPM	[R]A-R2-				X		Floor: Apt:
	Vacuum Surface Dust			[R]VA-R2-					X	Area vacuumed: M^2
Air Sample Blanks	Airborne Asbestos			[R]BA-A				X		
	Airborne Asbestos			[R]BA-B				X		

RELINQUISHED BY:	TIME/DATE:	RELINQUISHED BY:	TIME/DATE:
(PRINCIPAL/FIELD INVESTIGATOR)		*(LABORATORY REVIEWER)*	
RELINQUISHED BY:	**TIME/DATE:**	**RELINQUISHED BY:**	**TIME/DATE:**
(LABORATORY SAMPLE RECEIVING)		*(LABORATORY SUPERVISOR)*	
RELINQUISHED BY:	**TIME/DATE:**		
(ANALYST)			

SAMPLES SHIPPED TO:

COMPANY: EMSL Analytical, Inc.
ADDRESS: 307 West 38th Street
New York, NY 10018
ATTN: SAMPLE RECEIVING (Robert DeMaio)
PHONE: (856) 397-1901 (cell)
FAX: (856) 858-1292
CARRIER: EMSL courier
DATE:
TIME:
AIRBILL #:

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