

Air/Material Sampling Report

1. Reporting ID		2. Inspection/Visit/Intervention Number		3. Sampling Number	
4. Establishment Name				5. Public/Private (For Consultation use only) <input type="checkbox"/> Self-Help <input type="checkbox"/> Public <input type="checkbox"/> Private	
6. Person Performing Sampling (Signature)			7. CSHO ID	8. Sampling Date	9. Shipping Date
10. Employee Name			11. Job Title		
12. Exposure Information Number _____ Frequency _____				13. Photo(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Exposure Summary

14. Line No.	15. Sub-stance Code	16. Rqstd.	17. Sample Type	18. Exp. Type	19. Exp.Level	20. Units	21. PEL	22. Adj.	23. Severity	24. Citation/Hazard Information									
										No. Cited	FTA	Over Exp.	Eng.	PPE	Trng.	Med.	Other	No Haz.	
1.																			
2.																			
3.																			
4.																			
5.																			
25. Additives (enter Line numbers for those agent contributing to additive effect)																			
26. Total Number of Lines (14):				27. Date Results Received from Lab			28. Pump Model				Pump Number								

Sampling Data

29. Sample Submission Number																			
30. Sample Type/Media																			
31. Filter/Tube Number																			
32. Time On																			
Time Off																			
33. Total Time (in minutes)																			
34. Flow Rate																			
<input type="checkbox"/> l/min <input type="checkbox"/> ml/min																			
35. Volume (in liters)																			
36. Lab Sample Number																			

Results

37. Analyze For:		38. Reporting Limit																	
1.																			
2.																			
3.																			
4.																			
5.																			
39. Results Expressed In (unless otherwise noted)										40. Test Method									
41. Interferences & IH Comments to Lab				42. Supporting Samples (Blanks)				43. Chain of Custody				Date		Initials					
								a. Seals Intact?				Y	N						
								b. Received in Lab											
								c. Received by Analyst											
								d. Analyst Completed											
								e. Calculations Checked											
								f. Supervisor Approval											

Samples **NOT** blank corrected unless otherwise indicated. Results relate only to the items tested. Results apply to the samples as received.

