



Asbestos Air Field Data Sheet (side a)

Client Project #:				Phone:		
Client Name:				Fax:		
Project Manager:				Email:		
Project Location:				Abatement Firm:		
Sampled by:		Signature:		Date		
Received by:		Signature:		Date:		
Analyzed by:		Signature:		Date:		

Blank Cassettes	Blank Count 1:	Blank Count 2:	Blank Avg. Count:	Rota High Flow	Rota Lo Flow	# of Samples	Filter Size

Sample #				Location:			
Date:		Sample Type		Observations:			
Pump #:		Protection:					
Start Time:		Decon:					
End Time:		Total Time:					
Flow Start:		Environment:		Volume:	Fibers/Field	LOD	F/CC:
Flow End:		Avg. Flow					
Name:				ID#		SS#	

Sample #				Location:			
Date:		Sample Type		Observations:			
Pump #:		Protection:					
Start Time:		Decon:					
End Time:		Total Time:					
Flow Start:		Environment:		Volume:	Fibers/Field	LOD	F/CC:
Flow End:		Avg. Flow					
Name:				ID#		SS#	

Sample #				Location:			
Date:		Sample Type		Observations:			
Pump #:		Protection:					
Start Time:		Decon:					
End Time:		Total Time:					
Flow Start:		Environment:		Volume:	Fibers/Field	LOD	F/CC:
Flow End:		Avg. Flow					
Name:				ID#		SS#	

SAMPLE TYPES: B-Breathing Zone, P-Pre-abatement, TWA-Time Weight Average, A-Area, X-Aggressive, Inside Regulated Area, H-HEPA Exhaust, O-Outside Reg. Area, C-Ceiling, FB-Field Blank, STEL-Short Term Exposure Limit. CONTROLS: PA-Pressure Demand Air, CA-Continuous Flow Air, PAPR-Powered Air Purifying Respirator, F-Full Face, M-Half Face, Decontamination: DS-Decon with Shower, D-Decon without Shower ENVIRONMENT: H-HEPA Vacuum, N-Negative Air, G-Glovebag



Asbestos Air Field Data Sheet (side b)

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Client Name:			Abatement Firm:		
Sampled by:		Signature:		Date	
Received by:		Signature:		Date:	
Analyzed by:		Signature:		Date:	

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Date:		Sample Type		Observations:			
Pump #:		Protection:					
Start Time:		Decon:					
End Time:		Total Time:					
Flow Start:		Environment:		Volume:	Fibers/Field	LOD	F/CC:
Flow End:		Avg. Flow:					
Name:				ID#		SS#	

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Date:		Sample Type		Observations:			
Pump #:		Protection:					
Start Time:		Decon:					
End Time:		Total Time:					
Flow Start:		Environment:		Volume:	Fibers/Field	LOD	F/CC:
Flow End:		Avg. Flow:					
Name:				ID#		SS#	

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Date:		Sample Type		Observations:			
Pump #:		Protection:					
Start Time:		Decon:					
End Time:		Total Time:					
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Flow End:		Avg. Flow:					
Name:				ID#		SS#	

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Pump #:		Protection:					
Start Time:		Decon:					
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