

Request for Laboratory Analysis: Industrial Hygiene Air Sample

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|---|--|-------------------------|--------------------|---------|---------------|
| Project No.: | | RLA Reviewed By: | Date: | LS SRN: | |
| Project Officer: | | Email: | | Tel: | |
| Alternate POC: | | Email: | | Tel: | |
| Address: | | | | | |
| Installation Site: | | | | | |
| Fund Source: | | MIPR No.: | ARLOC / WIC / VC#: | | |
| Sample Collection Date: | | Sample Collection Time: | | Local | or UTC {Zulu} |
| SELECT Certificate of Analysis Delivery Schedule: | | | | | |
| Analysis Priority Requested (Justification Required for Non-Routine Priority): | | | | | |
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| Note: LS assumes neither responsibility nor liability for the sampling protocols employed by the customer. | | | | | |
| I do NOT authorize LS to sub-contract requested analyses to an accredited Contract Laboratory. | | | | | |

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|---|---------------|--------------|--|-----------------------|--|--|
| Description of Operation: | | | | | | |
| Persons Exposed: | | Hours / Day: | | Method of Collection: | | |
| Associated Complaints: | | | | | | |
| Analysis Requested: | | | | | | |
| <i>All lead (Pb) samples will be analyzed IAW NLLAP criteria therefore, the "Wipes" used for collection must meet to ASTM E1792 specs.</i> | | | | | | |
| <i>All wipe samples must be obtained by wiping a "one square foot sampling area (30.5 cm x 30.5 cm)".</i> | | | | | | |
| <i>Bulk Sample submitted (Bulk Sample Required for Asbestos Identification):</i> | | | | | | |
| Criteria | Sampling Data | | | | | |
| Sample ID (Field ID) | | | | | | |
| Pump No. | | | | | | |
| Time On | | | | | | |
| Time Off | | | | | | |
| Total Minutes | | | | | | |
| Flow Rate (LPM) | | | | | | |
| Volume (L) | | | | | | |
| GA/BZ | | | | | | |
| Employee ID | | | | | | |
| LS Sample ID | | | | | | |
| Comment for Lab: | | | | | | |

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|-----------------------------|--------------|--------------------------------------|
| — For Laboratory Use Only — | | |
| Date Received: | Received By: | Holding Area: CSD Bldg. 3809 Rm. 147 |
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