

Form 15.2 Field Sampling Form for Dust-Lead Hazard Clearance Examination (single-surface sampling).

Property address: _____ Apt. no. or common area: _____ Page _____ of _____

Name of property owner: _____ Name of clearance examiner: _____

Certification #: _____ Exp. date: _____

Sample Number	Room (if possible, use room names used by the owner or resident)	Surface Type (hard floor, carpeted floor, interior window sill, or window trough)	Exact Location of Wipe Sample	Dimensions of Sample Area ² (inches x inches) ¹	Area of Sample (sq. ft) ²	Results of Lab Analysis		Pass ³ (less than standard) or Fail (equal or greater than st'd.)
						µg of Pb in Sample	µg/ft ²	
				___ x ___				
				___ x ___				
				___ x ___				
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				___ x ___				

¹Measure to the nearest 1/8th or 1/10th of an inch. [1/8 = 0.125; 2/8 = 0.25; 3/8 = 0.375; 4/8 = 0.5; 5/8 = 0.625; 6/8 = 0.75; 7/8 = 0.875]

²Calculate area in square feet as follows: Calculate square inches, then divide by 144.

³EPA standards: 40 µg/sq. ft. for floors; 250 µg/sq. ft. for interior window sills; and 400 µg/sq. ft. for window troughs.

Total number of samples on this page: _____ Date of sample collection: ____/____/____ Date shipped to lab: ____/____/____

Shipped by: _____ (signature) Received by: _____ (signature and date) Reviewed by: _____ (signature and date)

Date results reported by lab: ____/____/____ Reviewed by: _____