

Substrate Correction Values

Address/Unit No. _____

Date _____ XRF Serial No _____

Inspector Name _____ Signature _____

Use this form when the *XRF Performance Characteristics Sheet* indicates that correction for substrate bias is needed.

Substrate		Brick	Concrete	Drywall	Metal	Plaster	Wood
L O C A T I O N	1	First Reading					
		Second Reading					
		Third Reading					
	2	First Reading					
		Second Reading					
		Third Reading					
Correction Value (Average of the Six Readings)							

Transfer Correction Value for each substrate to the 'Correction Value' column of the LBP Testing Data Sheet

Notes: