New Jersey Department of Health Consumer, Environmental and Occupational Health Service Environmental and Occupational Health Assessment Program P. O. Box 369, Trenton, NJ 08625-0369

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ASBESTOS MANAGEMENT PLAN - SUMMARY OF LABORATORY SAMPLES

(A copy of the Chain of Custody form and Laboratory Analysis form for each sample MUST be included.)

	Assessed

Sample Name of Sample Collector	Name of	Type* Homo- geneous ID No.	Homo-		Result		Lab ID Number	Date		Manner to	Method of
	Sample Collector		Exact Location	%	Type Asbestos	Collected		Analyzed	Determine Location**	Analysis	

*Type Codes:

- . 1 - Air
- 2 Bulk
- 3 Surface

- **Codes Manner Used to Determine Sampling Location (List all reasons which apply for each sample):
 - A The total extent of each homogeneous area was analyzed.
 - B The number of samples are as required.
 - C The material at each selected location is representative of the homogeneous area.
 - D The locations are uniformly distributed throughout the homogeneous area.
 - E The locations are <u>randomly</u> distributed throughout the homogeneous area.
 - F Each location is reasonably accessible.