



Industrial Hygiene Air Monitoring Continuation Worksheet

Asbestos Air Sampling (NIOSH Method 7400A)

Page 2 of 2

Project Number: 1919-0525

Project Name: 950 BUILDING Date: 3/31/20 PCM TEM NIOSH

Sample ID: 950-111 Observations: OUTSIDE CONTAINMENT 2ND FLOOR HALLWAY LOD: 0.003 f/cc

Sample Type: 0 Protection: NA Worker: SSN or Cert SEE MAP Fiber: 2

Decon: ↓ Environment: ↓ Start: 16:00 Start Flow: 2.5 Volume: 100 Field: 100

Pump: 133 Stop: 23:00 Stop Flow: 2.5 f/cc: 20003

Rotameter: HU14 Minutes: 470 Average: 2.5 TWA: _____ f/cc

Sample ID: 950-112 Observations: OUTSIDE CONTAINMENT 2ND FLOOR ELEVATOR LOBBY Date: 3/31/20 PCM TEM NIOSH

Sample Type: 0 Protection: NA Worker: SSN or Cert SEE MAP LOD: 0.003 f/cc

Decon: ↓ Environment: ↓ Start: 16:00 Start Flow: 2.5 Volume: 100 Field: 100

Pump: 315 Stop: 23:00 Stop Flow: 2.5 f/cc: 0.004

Rotameter: HU14 Minutes: 470 Average: 2.5 TWA: _____ f/cc

Sample ID: 950-113 Observations: OUTSIDE CONTAINMENT 3RD FLOOR CONFERENCE Date: 3/31/20 PCM TEM NIOSH

Sample Type: 0 Protection: NA Worker: SSN or Cert SEE MAP LOD: 0.003 f/cc

Decon: ↓ Environment: ↓ Start: 16:00 Start Flow: 2.5 Volume: 100 Field: 100

Pump: 420 Stop: 23:00 Stop Flow: 2.5 f/cc: 4003

Rotameter: HU14 Minutes: 470 Average: 2.5 TWA: _____ f/cc

Sample ID: 950-114 Observations: OUTSIDE CONTAINMENT 3RD FLOOR KITCHEN ETC Date: 3/31/20 PCM TEM NIOSH

Sample Type: 0 Protection: NA Worker: SSN or Cert SEE MAP LOD: 0.003 f/cc

Decon: ↓ Environment: ↓ Start: 16:00 Start Flow: 2.5 Volume: 100 Field: 100

Pump: 153 Stop: 23:00 Stop Flow: 2.5 f/cc: 50003

Rotameter: HU14 Minutes: 470 Average: 2.5 TWA: _____ f/cc

Sample ID: 950-115 Observations: BLANK Date: 3/31/20 PCM TEM NIOSH

Sample Type: FBL Protection: _____ Worker: _____ LOD: _____ f/cc

Decon: _____ Environment: _____ Start: _____ Start Flow: _____ Volume: _____ Field: 100

Pump: _____ Stop: _____ Stop Flow: _____ f/cc: _____

Rotameter: _____ Minutes: _____ Average: _____ TWA: _____ f/cc

Relinquished By (Print)	Date: <u>3/31/20</u>	Received By (Print)	Date
Relinquished By (Signature)	Time	Received By (Signature)	Time
Analyzed By (Print)	Date: <u>4-1-20</u>	Reviewed By (Print)	Date
Analyzed By (Signature)	Time	Reviewed By (Signature)	Time

Industrial Hygiene Air Monitoring Worksheet
Asbestos Air Sampling (NIOSH Method 7400A or 7402)

Project Name: 950 Building
Project Location: 950 Fawcett Avenue
 Tacoma, WA 98402

Project Number: N19-0575
Client: Hultz BHU
Supervisor: Rick Hultz

Sample By: NATZ REYNOLDS **Date:** 3/31/20 **Page:** 1 of 2

Sample ID 950-107	Observations LOAD OUT AREA	<input checked="" type="checkbox"/> PCM <input type="checkbox"/> TEM NIOSH
Sample Type: I		LOD 0.003 f/cc
Protection: NA		Fiber 3
Decon: ↓	Worker SSN or Cert SEE MAP	Field 100
Environment: ↓	Start 15:45 Start Flow 2.5	f/cc 10003
Pump: LV17	Stop 23:00 Stop Flow 2.5	TWA f/cc
Rotometer LV14	Minutes 435 Average 2.5 Volume 1087.5 L	

Sample ID 950-108	Observations CLEAN ROOM	<input checked="" type="checkbox"/> PCM <input type="checkbox"/> TEM NIOSH
Sample Type: I		LOD 0.003 f/cc
Protection: NA		Fiber 2
Decon: ↓	Worker SSN or Cert SEE MAP	Field 100
Environment: ↓	Start 15:45 Start Flow 2.5	f/cc 10003
Pump: LV118	Stop 23:00 Stop Flow 2.5	TWA f/cc
Rotometer LV14	Minutes 435 Average 2.5 Volume 1087.5 L	

Sample ID 950-109	Observations NEG-AIR HEPA	<input checked="" type="checkbox"/> PCM <input type="checkbox"/> TEM NIOSH
Sample Type: H		LOD 0.003 f/cc
Protection: NA		Fiber 0
Decon: ↓	Worker SSN or Cert SEE MAP	Field 100
Environment: ↓	Start 15:45 Start Flow 2.5	f/cc 10003
Pump: LV6A	Stop 23:00 Stop Flow 2.5	TWA f/cc
Rotometer LV14	Minutes 435 Average 2.5 Volume 1087.5 L	

Sample ID 950-110	Observations OUTSIDE CONTAINMENT OUTSIDE DECON	<input checked="" type="checkbox"/> PCM <input type="checkbox"/> TEM NIOSH
Sample Type: O		LOD 0.003 f/cc
Protection: NA		Fiber 3
Decon: ↓	Worker SSN or Cert SEE MAP	Field 100
Environment: ↓	Start 16:00 Start Flow 2.5	f/cc 4003
Pump: 423	Stop 23:00 Stop Flow 2.5	TWA f/cc
Rotometer HV14	Minutes 420 Average 2.5 Volume 1050 L	

Sample Types		
P	Personal	CL Clearance
E	Excursion	H Hepa
C	Ceiling	FBL Field Blank
I	Inside Area	SBL Sealed Blank
O	Outside Area	Pre Preliminary

Control Measures		
Respiratory Protection	Decontamination	Environment
M Half Face APR	D Decon w/o Shower	G Glovebag
F Full Face APR	DS Decon w/ Shower	M Mini Enclosure
PAPR Powered APR	DBS Double Suite	F Full Enclosure
CF Continuous Flow	LDS Local Decon Station	ME Modified Encl.
PD Pressure Demand		R Regulated Area
		NE No Enclosure

Turnaround
<input type="checkbox"/> Now
<input type="checkbox"/> 24 Hour
<input type="checkbox"/> 3 Day
<input type="checkbox"/> 5 Day
<input type="checkbox"/> 7 Day
<input type="checkbox"/> 14 Day

Relinquished By (print) N REYNOLDS	Date 3/31/20	Received By (print)	Date
Relinquished By (signature) [Signature]	Time	Received By (signature)	Time
Analyzed By (print) DRAUCKER	Date 4-1-20	Reviewed By (print)	Date
Analyzed By (signature) [Signature]	Time 8:01 AM	Reviewed By (signature)	Time

Project Name: 950 Bldg

Project Number:

Sample ID: 950-98	Observations	Date: 4-1-200	<input type="checkbox"/> PCM
Sample Type: 0	Blind Recount	Worker	<input type="checkbox"/> TEM NIOSH
Protection:			LOD _____ f/cc
Decon:	Start _____ : _____	Start Flow _____	Fiber: 3
Environment:	Stop _____ : _____	Stop Flow _____	Field: 100
Pump:	Minutes _____	Average _____	f/cc _____
Rotometer		Volume _____ L	TWA _____ f/cc

Sample ID	Observations	Date:	<input type="checkbox"/> PCM
Sample Type:	Worker	SSN or Cert	<input type="checkbox"/> TEM NIOSH
Protection:			LOD _____ f/cc
Decon:	Start _____ : _____	Start Flow _____	Fiber _____
Environment:	Stop _____ : _____	Stop Flow _____	Field _____
Pump:	Minutes _____	Average _____	f/cc _____
Rotometer		Volume _____ L	TWA _____ f/cc

Sample ID	Observations	Date:	<input type="checkbox"/> PCM
Sample Type:	Worker	SSN or Cert	<input type="checkbox"/> TEM NIOSH
Protection:			LOD _____ f/cc
Decon:	Start _____ : _____	Start Flow _____	Fiber _____
Environment:	Stop _____ : _____	Stop Flow _____	Field _____
Pump:	Minutes _____	Average _____	f/cc _____
Rotometer		Volume _____ L	TWA _____ f/cc

Sample ID	Observations	Date:	<input type="checkbox"/> PCM
Sample Type:	Worker	SSN or Cert	<input type="checkbox"/> TEM NIOSH
Protection:			LOD _____ f/cc
Decon:	Start _____ : _____	Start Flow _____	Fiber _____
Environment:	Stop _____ : _____	Stop Flow _____	Field _____
Pump:	Minutes _____	Average _____	f/cc _____
Rotometer		Volume _____ L	TWA _____ f/cc

Sample ID	Observations	Date:	<input type="checkbox"/> PCM
Sample Type:	Worker	SSN or Cert	<input type="checkbox"/> TEM NIOSH
Protection:			LOD _____ f/cc
Decon:	Start _____ : _____	Start Flow _____	Fiber _____
Environment:	Stop _____ : _____	Stop Flow _____	Field _____
Pump:	Minutes _____	Average _____	f/cc _____
Rotometer		Volume _____ L	TWA _____ f/cc

Relinquished By (print)	Date	Received By (print)	Date
Relinquished By (signature)	Time	Received By (signature)	Time
Analyzed By (print)	Date	Reviewed By (print)	Date
Analyzed By (signature)	Time	Reviewed By (signature)	Time

Analyzed By (print): D Rauschauer
 Date: 4-1-20
 Analyzed By (signature): Don
 Time: 8:00 AM