

AAA Management & Associates, Inc.

SAMPLE DUST SAMPLING  
INSPECTION REPORT

MARYLAND DEPARTMENT OF THE ENVIRONMENT

Land Management Administration • Lead Poisoning Prevention Compliance & Accreditation Division
1800 Washington Blvd • Suite 63 • Baltimore Maryland 21230
(410) 537-3825 • 1-800-633-6101 x3825 • www.mde.state.md.us

FORM C - DUST INSPECTION

VISUAL REVIEW / DUST SAMPLE COLLECTION & ANALYSIS

The lead paint inspection contractor/inspector is to submit a copy of the Lead Paint Risk Reduction Inspection Certificate (Form 330), with this Form C which includes the diagram; a copy of the lab results to Maryland Department of the Environment and the property owner WITHIN 10 CALENDAR DAYS following the inspection. This form must be fully completed and accurate or the Inspection Certificate may be invalidated. (EA 6-8, COMAR 26.16.02 and

Table with 3 columns: MDE Tracking No.: 0000000, Date of Inspection: 11/2/2016, Inspection Certificate No.: 000000

Address of Property Inspected:

Table with 5 columns: Street Address: 1234 Main Street, Unit No.: 000, City: Any Town, Zip Code: 00000, County/City:

Table with 2 columns: Date of Lab Report: 11/7/2016, Date Lab Report was Received by Inspector: 11/7/2016

PART I – VISUAL REVIEW

Visually review all interior and exterior painted surfaces of unit for chipping, peeling, or flaking paint. If chipping, peeling, or flaking paint is found, corrections must be made before dust samples may be collected. Exterior corrections may be delayed if interior paint condition is satisfactory and an Exterior Waiver is approved.

Table with 3 columns: Is Condition of Paint Satisfactory?, INTERIOR, EXTERIOR. Includes rows for 'Is an Exterior Waiver being used?' with 'No'.

If Yes, this Certificate expires on: \_\_\_\_\_. The property must pass re-inspection no later than this date or this inspection certificate will no longer be valid. Name of the approving agency or official for the Exterior Waiver: \_\_\_\_\_. Form D with the Supervisor's Statement of Work form must be submitted to MDE and the property owner by the lead inspector.

PART II – DIAGRAM

On a separate sheet of paper, provide a diagram of the unit. The diagram is to include: the full site address, street(s) adjacent to the outside entry with the street name(s), location of the unit within a multi-unit property if applicable, window and doorway locations, assigned room numbers, and locations of where dust samples were taken. Show each room within the unit and number each. Your numbering system on your diagram is to match Part III of this form. Note locations of windows with a "W" and sampling locations with an "X". Attach the diagram to this form.

PART III – DUST COLLECTION ANALYSIS

After collection of samples in a room, enter the total number of samples that were taken in that room. Attach additional copies of page 2 of this form if there are more rooms than can be accommodated on the back of this form. The "Meets Standard" column requires circling a Yes or No. Under Maryland law, the Lead Risk Reduction Standard for dust is: floors <40; window sills <250; window wells <400 µg/ft2. A copy of the Laboratory Analysis Report must be attached to this form. The Result column, below, is for results/concentration of lead in micrograms per square foot (µg/ft2), not Total Lead (µg).

**FORM C, PART III Continued**

**Inspection Certificate No.:**

000000

**Page No.:**

Page 2 of 2

Is this a retest of failed room(s)	No
------------------------------------	----

	SAMPLE No.	AREA (in inches)	RESULT $\mu\text{g}/\text{ft}^2$
* Field Blank	N/A	N/A	N/A

\* Field blank samples are required to be collected per the American Society for Testing and Materials (ASTM) International Standard E 1728 as of May 19, 2008. Field blanks only have to be collected at a minimum frequency of 5% (or 1 for every 20 field wipe samples collected). Therefore, completion or not of the Field Blank box may vary.

ROOM NO.: 1 (Front Room)		Number of NON-Lead Free windows in room: 0	Number of Lead Free windows in room: 0	Total number of windows in room: 0
SURFACE	SAMPLE No.	AREA (in inches)	RESULT $\mu\text{g}/\text{ft}^2$	MEETS STANDARD
Floor	1	10 x 10	< 14.4	Yes

Total Samples Collected in room: 1

ROOM NO.: 2 (Kitchen)		Number of NON-Lead Free windows in room: 0	Number of Lead Free windows in room: 0	Total number of windows in room: 0
SURFACE	SAMPLE No.	AREA (in inches)	RESULT $\mu\text{g}/\text{ft}^2$	MEETS STANDARD
Floor	2	11.5 x 11.	< 11.38	Yes

Total Samples Collected in room: 1

ROOM NO.: 3 (Bathroom)		Number of NON-Lead Free windows in room: 0	Number of Lead Free windows in room: 0	Total number of windows in room: 0
SURFACE	SAMPLE No.	AREA (in inches)	RESULT $\mu\text{g}/\text{ft}^2$	MEETS STANDARD
Floor	3	12 x 12	< 10	Yes

Total Samples Collected in room: 1

ROOM NO.: 4 (Laundry Room)		Number of NON-Lead Free windows in room: 0	Number of Lead Free windows in room: 0	Total number of windows in room: 0
SURFACE	SAMPLE No.	AREA (in inches)	RESULT $\mu\text{g}/\text{ft}^2$	MEETS STANDARD
Floor	4	11 x 12	< 10.91	Yes

Total Samples Collected in room: 1

ROOM NO.: 5 (Bedroom)		Number of NON-Lead Free windows in room: 0	Number of Lead Free windows in room: 1	Total number of windows in room: 1
SURFACE	SAMPLE No.	AREA (in inches)	RESULT $\mu\text{g}/\text{ft}^2$	MEETS STANDARD
Floor	5	10.5 x 9.5	< 14.44	Yes

Total Samples Collected in room: 1

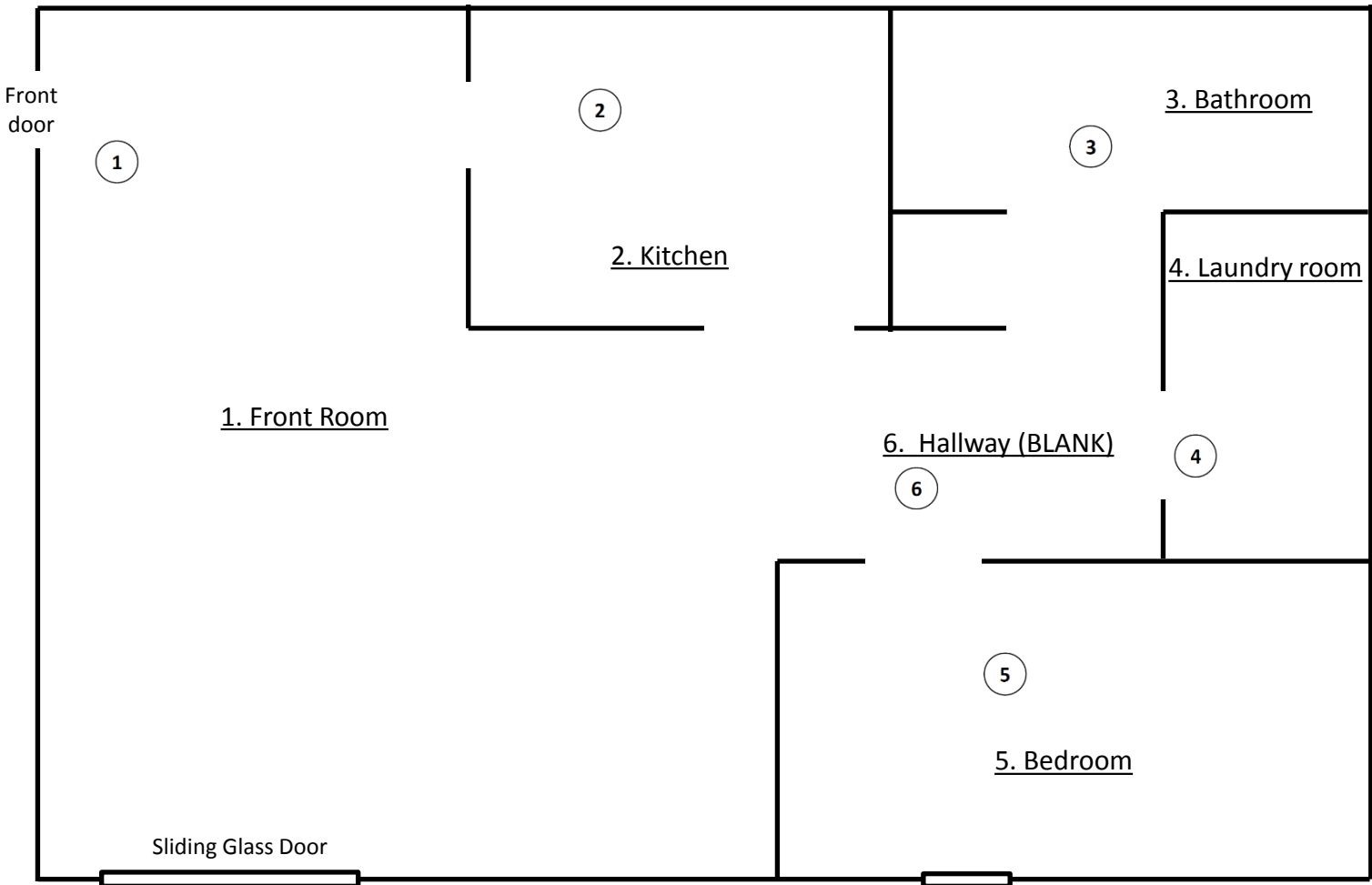
ROOM NO.: 6 (Hallway)		Number of NON-Lead Free windows in room: 0	Number of Lead Free windows in room: 0	Total number of windows in room: 0
SURFACE	SAMPLE No.	AREA (in inches)	RESULT $\mu\text{g}/\text{ft}^2$	MEETS STANDARD
Floor	6	12 x 12	< 10	Yes


Total Samples Collected in room: 1


Accredited Inspector's Name: Teryl West	Inspector's Accreditation No.: 14829	Date of Inspection: 11/2/2016
--	---	----------------------------------

Drawing NOT to scale.

# 1234 Main Street – Unit 000 – Any Town, ST 0000



 Location of Windows

 Locations of Samples  
All samples are floors, 12" x 12"



### Certificate of Analysis: Lead In Dust Wipe by NIOSH Method 7082

Client : AAA Management and Associates  
12300 Samantha Ct.  
Upper Marlboro, MD 20774

Attn : Teryl West                      Email : teryl@leadinspector.us  
Phone : 301-541-8052                  Fax :

AAT Project : 315408  
Sampling Date : 11/02/2016  
Date Received : 11/04/2016  
Date Analyzed : 11/07/2016  
Date Reported : 11/7/2016 10:19:07AM

Client Project : 2

Project Location : 1

Lab Sample ID	Client Code	Sample Description	Length (inch)	Width (inch)	Area (Sq ft)	Results Lead $\mu\text{g}/\text{ft}^2$ *
2994801	1	FRONT BEDROOM F	10	10	0.69	<14.40
2994802	2	KITCHEN F	11.5	11	0.88	<11.38
2994803	3	BATHROOM F	12	12	1.00	<10.00
2994804	4	LAUNDRY ROOM F	11	12	0.92	<10.91
2994805	5	BEDROOM F	10.5	9.5	0.69	<14.44
2994806	6	HALLWAY F	12	12	1.00	<10.00

Analyst Signature

Nathan Ditty

(ND=Not Detected, NA=Not Available, RL=Reporting Limit; Analytical Reporting Limit is 10  $\mu\text{g}/\text{sample}$ ) \* For true values assume (2) significant figures. The method and batch QC is acceptable unless otherwise stated. EPA HUD Regulatory Limits: 40  $\mu\text{g}/\text{ft}^2$  (Rooms Carpeted/un-carpeted), 250  $\mu\text{g}/\text{ft}^2$  (Window Sill/Stock), 400  $\mu\text{g}/\text{ft}^2$  (Window Sill/Ext. Concrete Surfaces) The laboratory operates in accord with ISO 17025 guidelines and holds limited scopes of accreditation under AIHA and NY State DOH ELAP programs. These results are submitted pursuant to AAT LLC current terms and conditions of sale, including the company's standard warranty and limitation of liability provisions. Analytical results relate to the samples as received by the lab. AAT will not assume any liability or responsibility for the manner in which the results are used or interpreted. All Quality control requirements for the samples this report contains have been met.

AIHA ELAP- Lab ID #100966, NY State DOH ELAP -Lab ID #15864, State of Ohio- Lab ID # 10042

Date Printed: 11/07/2016

AAT Project: 315408

