Job Address:		

## **CAZ Environmental Services**

2034 Franklin St, Bellingham WA 98225 | 360-389-1056

**Air Sample Chain of Custody (NIOSH 7400)** 

Sample ID:		Location				Time Start:		
Sample type: P A S B H C	CR CL	Activities	:			Time End:		
Protection: M F CF NA		Worker				Rate Start:		
Decon: D D, S NA						Rate End:	-	-
Environment: G H N NA						1.0.00 = 1.0.0	-	-
Sample ID:		Location				Time Start:		
Sample type: P A S B H C	CR CL	Activities	-			Time End:		
Protection: M F CF NA		Worker				Rate Start:		
Decon: D D, S NA						Rate End:	-	-
Environment: G H N NA								
Sample ID:		Location				Time Start:		
Sample type: P A S B H C		Activities				Time End:	-	-
Protection: M F CF NA		Worker	:			Rate Start:		
Decon: D D, S NA						Rate End:		
Environment: G H N NA								
Sample ID:		Location	:			Time Start:		
Sample type: P A S B H C	CR CL	Activities	:			Time End:		
Protection: M F CF NA		Worker	:			Rate Start:		
Decon: D D, S NA						Rate End:		
Environment: G H N NA								
Sample ID:		Location	•			Time Start:		
Sample type: P A S B H C	CR CL	Activities				Time End:	'	<u> </u>
Protection: M F CF NA		Worker	:			Rate Start:	'	, ,
Decon: D D, S NA						Rate End:		,
Environment: G H N NA								
Sample ID:		Location	•			Time Start:	_	
Sample type: P A S B H C	CR CL	Activities	:			Time End:		
Protection: M F CF NA		Worker	:			Rate Start:		<u>.</u>
Decon: D D, S NA						Rate End:	'	<u> </u>
Environment: G H N NA								
Sample ID:		Location				Time Start:		
Sample type: P A S B H C	CR CL	Activities	:			Time End:		
Protection: M F CF NA		Worker	:			Rate Start:		
Decon: D D, S NA						Rate End:		
Environment: G H N NA								
Sample ID			Sample ID			Day:		
Blank 1:		Blank 3:				No. of Samples Submitted:		
Blank 2:		Blank 4:				No. of Blanks Submitted:		
Signature			Date	Time		Signature	Date	Time
Sampled By:					Received By:			
Delivered By:					Analyzed By:			
Sample Typ	pes		R	espirato	ory Protection	Decontamination E	nvironm	ent

P - Pre-Abatement A - Outside Area S - STEL

**CR - Clean Room CL- Clearance** H - HEPA Exhaust Respiratory Protection M - Half Mask F - Full Face Mask

**CF - Supplied Air** 

Decontamination D - Decon w/o Shower D,S - Decon w Shower

G - Glove Bag H - HEPA Vac N - Negative Air