

**LEA:** \_\_\_\_\_  
**School:** \_\_\_\_\_  
**Building:** \_\_\_\_\_  
**Sample Date:** \_\_\_\_\_  
**Analysis Date:** \_\_\_\_\_  
**Analysis Method:** \_\_\_\_\_

**BULK SAMPLE ANALYSIS**

HOMOGENEOUS AREA(S): \_\_\_\_\_

Owner Sample ID	Lab Sample ID	Asbestos Type	Asbestos %	Comments

*It is certified by the signature below that the laboratory identified below is accredited by the National Institute of Standards/Technology for polarized light microscope (PLM) analysis under the National Voluntary Laboratory Accreditation Program.*

Laboratory:	Address:
NVLAP Laboratory #:	

**Analysis Performed By:**

Typed Name:	Signature:	Date:
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## Instructions for Bulk Sample Analysis

**Purpose:** To provide a copy of analyses of bulk samples collected and analyzed as described in 40 CFR Part 763.93 (e)(3)(iv) of the EPA Asbestos-Containing Materials in Schools; Final Rule and Notice.

**Preparation:** In the top right-hand corner of this form, enter the name of the LEA, the school name, the building name, the date the sample(s) were taken, the date the sample(s) were analyzed, and the analysis method. The analysis date and analysis method shall be supplied by the laboratory performing the analysis. The sample date, building, school and LEA name shall be supplied by the inspector.

Under "Homogeneous Area(s)," the inspector shall describe the unique area where the samples have been taken.

Under the column "Owner Sample ID," the inspector shall include the unique number for each sample being submitted for laboratory analysis. The inspector shall leave sufficient room for the laboratory to supply information necessary for each sample.

Under the column "Lab Sample ID," the specific laboratory identification for each sample will be supplied.

Under the column "Asbestos Type," the laboratory shall supply the type of asbestos identified for each sample.

Under the column "Asbestos %," the laboratory shall supply the percent of asbestos for each sample.

Under the column "Comments," additional information will be supplied, such as the gross sample appearance, sample treatment, other fibrous materials present, non-fibrous materials present, and whether or not the sample material appears to be friable.

At the bottom of this form, enter the name and address of the laboratory performing the analysis, the NVLAP Laboratory #, the typed name and signature of the person who performed the analysis and the date of the signature.

**Distribution:** Attach to DHHS 3531, AHERA Management Plan Cover Sheet and mail to:

NCDHHS/Public Health  
Occupational & Environmental Epidemiology Branch  
Health Hazards Control Unit  
1912 Mail Service Center  
Raleigh, North Carolina 27699-1912

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