				LEA:		
				ilding:		
			Sample	e Date:		
			Analysis Date:			
BULK SAMPL	E ANAI VCIC		Analysis M	lethod:		
DULK SAMILLI	L ANAL I DID					
HOMOGENEOUS	S AREA(S):					
				<u> </u>		
Owner Sample ID	Lab Sample ID	Asbestos Type	Asbestos %		Comments	
		<u> </u>				
		 	<u> </u>			
	+	+				
		+	+			
			+			
		<u> </u>	<u> </u>			
		 				
		+				
	+	+	-			
	ture below that the labora sis under the National Vo				titute of Standards/Technology for polarized lig	
Laboratory:			Address:			
NVLAP Laborator	NVLAP Laboratory #:					
Analysis Parforn	mod Rv.					
Analysis Performed By: Typed Name:		Signature:			Date:	

DHHS 3536 (Revised 7/99; 1/2013)

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 Health Hazards Control Unit 1912 Mail Service Center Raleigh, North Carolina 27699-1912

For additional forms, please photocopy or refer to our website: http://www.epi.state.nc.us/epi/asbestos/forms.html